07/13/2011 13:40

Image# 11931808322

### FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		OI OIII	ei illali Ali	Authorize	eu Commi	illee		Office Us	se Only	
1.			MAILING LAI OR PRINT		kample:If typ rer the lines	ing, type				
	HCR Manor Care PAC		1 1 1 1							
								1 1 1 1 1		
AD	DRESS (number and street)	333 No	orth Summit St	reet						
_	Check if different	16th FI	oor			1 1 1 1				
L	than previously reported. (ACC)	Toledo					OH	4	3604	2617 
2.	FEC IDENTIFICATION NUMBER	BER 1	_	CITY 🛕			STATE	4	ZIPCODE	<b>A</b>
	C00260141			3. IS THIS REPOR	Т	NEW (N) <b>OF</b>	R	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	`´R	onthly eport	Feb 20 (M2	2)	May 20 (M	5)	Aug 20 (M8)	No (N Ye	ov 20 (M11) on-Election ear Only)
	(a) Quarterly Reports:	ט	ue On:	Mar 20 (M3	3)	Jun 20 (M	5)	Sep 20 (M9)	De	ec 20 (M12) on-Election ear Only)
	April 15			Apr 20 (M4	.)	Jul 20 (M7	)	Oct 20 (M10)	Ja	ın 31 (YE)
	Quarterly Report(Q1 July 15 Quarterly Report(Q2	(c)	12-Day <b>PRE</b> -Election	on $\square$	Primary (1	12P)	Ge	neral (12G)	Ru	unoff (12R)
	October 15 Quarterly Report(Q3		Report for t	he:	Conventio	n (12C)	Sp	ecial (12G)		
	January 31 Quarterly Report(YE		I	Election on					in the State of	
	X July 31 Mid-Year Report(Non-election Year Only) (MY)	(d)	30-Day  Post -Elec Report for t		General (3	30G)	Ru	noff (30R)	Sp	pecial (30S)
	Termination Report (TER)		·	Election on					in the State of	
5.	Covering Period 0 1	0	1 201	1	throug	h 06	3 (	2011		
l ce	ertify that I have examined this R	eport and	to the best of i	my knowledge	and belief it	t is true, corre	ect and com	plete.		
Тур	oe or Print Name of Treasurer	Mr. Jo	seph H Heide	brink						
Sig	nature of Treasurer Electroni	ically Filed	l by Mr. Jos	eph H Heideb	orink		Date	07 13	3 20	11
NO	TE : Submission of false, errone	eous, or ir	complete infor	mation may s	ubject the pe	erson signing	this Report	to the penalties	of 2 U.S.C	437g.
	Office Use Only								FORM (	3X

### SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name HCR Manor Care PAC

FEC Form 3X (Rev. 02/2003)

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1  2011		32261.87
	(b) Cash on Hand at Begining of Reporting Period	32261.87	
	(c) Total Receipts (from Line 19)	119808.52	119808.52
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	152070.39	152070.39
7.	Total Disbursements (from Line 31)	134836.63	134836.63
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	17233.76	17233.76
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name HCR Manor Care PAC

Report Covering the Period:

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From:

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	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  a) Individuals/Persons Other		
(	Than Political Committees  (i) Itemized (use Schedule A)	99563.12	99563.12
	(ii) Unitemized	20230.74	20230.74
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	119793.86	119793.86
(	b) Political Party Committees	0.00	0.00
`	c) Other Political Committees (such as PACs) d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	119793.86	119793.86
	Fransfers From Affiliated/Other Party Committees	0.00	0.00
3. <i>A</i>	All Loans Received	0.00	0.00
4. L 5. (	oan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
(	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
t	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	14.66	14.66
	Fransfers from Non-Federal and Levin Funds		
(	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(	b) Levin Funds (from Schedule H5)	0.00	0.00
(	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	119808.52	119808.52
	otal Federal Receipts subtract Line 18(c) from Line 19)	119808.52	119808.52

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### DETAILED SUMMARY PAGE

of Disbursements

FEC. Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
Operating Expenditures:  (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	86.63	86.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	86.63	86.63
2. Transfers to Affiliated/Other Party  Committees	0.00	0.00
Contributions to     Federal Candidates/Committees     and Other Political Committees	106500.00	106500.00
Independent Expenditure     (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To:     (a) Individuals/Persons Other     Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9. Other Disbursements	28250.00	28250.00
0. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	134836.63	134836.63
_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<ol> <li>Total Federal Disbursements         (subtract Line 21(a)(ii) and Line 30(a)(ii)</li> </ol>		
from Line 31)	134836.63	134836.63

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	119793.86	119793.86
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
85.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	119793.86	119793.86
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	86.63	86.63
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	86.63	86.63

FE6AN026

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 6 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be so e name and address of a	old or used by any persony political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
/	HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial) Charlean Adams			Date of Receipt
	Mailing Address 219 Evergreen Ln			06 29 2011
	City <u>Twin Lakes</u>	State Zip C WI 5318		Transaction ID: SA11AI.33904  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		584.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Bi-Weekly Payroll Deduction - 44*10 +50*2
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	Date ▼ 584.00	
_	Full Name (Last, First, Middle Initial) Pauletta Adams			Date of Receipt
	Mailing Address 12132 Turnberry Drive	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip C	Code	Transaction ID: SA11AI.33809
	Rancho Mirage	CA 9227	70	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2000.00
	Name of Employer HCR Manor Care, Inc.	Occupation General Manager	· - West Div & HHHH	Contribution
	Receipt For:	Aggregate Year-to-D	Date ▼	
	Primary General Other (specify) ▼	0 0 0	2000.00	
_	Full Name (Last, First, Middle Initial) Martin D Allen			Date of Receipt
	Mailing Address 7151 Whispering Oak			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sylvania	State Zip COH 4356		Transaction ID: SA11AI.33906
	FEC ID number of contributing federal political committee.	OH 4356	50	Amount of Each Receipt this Period  1444.24
	Name of Employer HCR ManorCare Inc.	Occupation AVP / Dir Internal	I Aud & Risk	Bi-Weekly Payroll Deduction - 75*9 + 192.31*4
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D		
Γ	SUBTOTAL of Receipts This Page (optional) .	1		4028.24

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions
. ∠ 	Full Name (Last, First, Middle Initial) Jenny Altstaetter  Mailing Address 2313 Marengo St		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.33748
	Toledo FEC ID number of contributing federal political committee.	OH 43614	Amount of Each Receipt this Period  250.00
	Name of Employer HCR ManorCare  Receipt For:  Primary General Other (specify) ▼	Occupation Medicaid Manager  Aggregate Year-to-Date ▼  250.00	Contribution
3.	Full Name (Last, First, Middle Initial) Michael Armstrong Mailing Address 115 N. Remington Rd.		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.33910
	Bexley	OH 43209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	326.70  Bi-Weekly Payroll Deducti-
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	on Dividenty Fayron Beddeti
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 326.70	
_	Full Name (Last, First, Middle Initial) Deborah A Arrendale	L	Date of Receipt
	Mailing Address 7100 Sunshine Skywa #401	y Lane South	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: SA11AI.33911
	St. Petersburg  FEC ID number of contributing federal political committee.	FL 33711	Amount of Each Receipt this Period  270.76
	Name of Employer HCR ManorCare, Inc.	Occupation 4H East Div. General Mgr.	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.76	
Γ	SUBTOTAL of Receipts This Page (optional)	1	847.46

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may ne name and add	r not be sold or used by any pers Iress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms Tammy Barker  Mailing Address 4521 Sutton Rd			Date of Receipt  O 6 29 2011
	City Britton	State MI	Zip Code 49229	Transaction ID: SA11AI.33916
	FEC ID number of contributing federal political committee.	C	45225	Amount of Each Receipt this Period 695.63
	Name of Employer HCR Manor Care, LLC.  Receipt For:  Primary General Other (specify) ▼		nality Support Svcs Year-to-Date ▼ 695.63	Bi-Weekly Payroll Deduction - 53.51
	Full Name (Last, First, Middle Initial) Suzanne L Baron Mailing Address 134 Lakeshore Dr. #	414		Date of Receipt
	City	State	Zip Code	06 29 2011
	City North Palm Beach	FL	33408	Transaction ID: SA11AI.33919  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		219.18
	Name of Employer HCR Manor Care, Inc.	Occupation Administr		Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 219.18	
_	Full Name (Last, First, Middle Initial) Joseph Barrick			Date of Receipt
	Mailing Address 448 Woodcrest Drive	)		0 6 2 9 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.33920
	Mechanicsburg FEC ID number of contributing federal political committee.	C	17050	Amount of Each Receipt this Period  332.28
	Name of Employer HCR Manor Care, Inc.	Occupation Administr	rator - York South	Bi-Weekly Payroll Deduction - 27.69
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 332.28	
	SUBTOTAL of Receipts This Page (optional)	1		1247.09

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
\ \ \	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	tson for the purpose of soliciting contributions to solicit contributions from such committee.
/	HCR Manor Care PAC  Full Name (Last, First, Middle Initial)		
	Charles Batcher  Mailing Address 910 Orchard Drive		Date of Receipt    M M
	City Rossford	State Zip Code OH 43460	Transaction ID: SA11AI.33921  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	452.27
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼	Occupation Director - Dementia Services  Aggregate Year-to-Date   452.27	Bi-Weekly Payroll Deduction
_	Full Name (Last, First, Middle Initial) Ms Julie Beckert Mailing Address 3911 Buell		Date of Receipt
	City	State Zip Code	0 6 2 9 2 0 1 1 Transaction ID: SA11AI.33930
	<u>Toledo</u>	OH 43613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	540.00
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Marketing	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
_	Full Name (Last, First, Middle Initial) Katherine Benkowski	1	Date of Receipt
	Mailing Address 9811 Perfect Drive		06 24 2011
	City Port St. Lucie	State Zip Code FL 34986	Transaction ID: SA11AI.33902  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	900.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Manager of Clincal Education	Credit Card Contribution - VISA
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
	SUBTOTAL of Receipts This Page (optional) .	1	1892.27

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any peen ame and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		
•	Jean Tina Blahofski Mailing Address 4266 Weston Dr		Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.33933
	Weston Lakes	TX 77441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Ops	Bi-Weekly Payroll Deducti- on - 25.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	Full Name (Last, First, Middle Initial) James R Bolton	<u> </u>	Date of Receipt
	Mailing Address 2209 Bayward Blvd		0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.33935
	Wilmington  FEC ID number of contributing federal political committee.	DE 19802	Amount of Each Receipt this Period  370.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
_	Full Name (Last, First, Middle Initial) Ms Judy L Bowes		Date of Receipt
	Mailing Address 2909 Maplewood Pl		06 29 2011
	City Alexandria	State Zip Code VA 22302	Transaction ID: SA11AI.33937  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	375.05
	Name of Employer HCR ManorCare, LLC	Occupation Administrator	Bi-Weekly Payroll Deducti- on - 28.85
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.05	
٩	UBTOTAL of Receipts This Page (optional) .		1070.05

П	CHEDULE A (FEC Form 3X)  TEMIZED RECEIPTS  ny information copied from such Reports and St	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 78 (check only one)    X
0	r for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	name and address of any political committee	to solicit contributions from such committee.
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Pamela Britt  Mailing Address 27135 State Route 49		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Potomac	State Zip Code IL 61865	Transaction ID: SA11AI.33941  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary  General  Other (specify) ▼	Occupation Administrator - Champaign Aggregate Year-to-Date ▼  350.00	Bi-Weekly Payroll Deducti- on - 50.00
3.	Full Name (Last, First, Middle Initial) David Burke Mailing Address 425 Kingwood Rd		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.33945
	Linthicum Heights  FEC ID number of contributing federal political committee.	MD 21090	Amount of Each Receipt this Period  557.70
	Name of Employer HCR ManorCare Inc. Receipt For:	Occupation Administrator Aggregate Year-to-Date	Bi-Weekly Payroll Deduction
	Primary General Other (specify) ▼	557.70	
	Full Name (Last, First, Middle Initial) Candace Burks-McCoy  Mailing Address 601 N. Shore Dr		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11Al.33946
	Cisco FEC ID number of contributing federal political committee.	TX 76437	Amount of Each Receipt this Period 287.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Senior Manager Clinical Services	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 287.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1194.70

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
2	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Charlie Byrne		Date of Receipt
	Mailing Address 4685 Rio Poco Ct		06 29 7 2011
	City Naples	State Zip Code FL 34109	Transaction ID: SA11AI.33949  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	598.60
	Name of Employer HCR. Manor Care, Inc  Receipt For:  Primary General  Other (specify) ▼	Occupation Administrator  Aggregate Year-to-Date   598.60	Bi-Weekly Payroll Deduction
	Full Name (Last, First, Middle Initial) Shirley D Cabildo Mailing Address 38 Bentley Court		Date of Receipt
			06 29 201,1
	City Bedminster	State Zip Code NJ 07921	Transaction ID: SA11AI.33950  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	389.26
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 389.26	
_	Full Name (Last, First, Middle Initial) Javier Cavero		Date of Receipt
	Mailing Address 3077 N. Oakland For	rest Dr. #202	06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.33955
	Oakland Park FEC ID number of contributing federal political committee.	FL 33309	Amount of Each Receipt this Period  243.51
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 243.51	
	SURTOTAL of Receipts This Page (optional)		1231.37

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. William Chenevert Mailing Address 2018 N. Rosemary		Date of Receipt
City Tucson	State Zip Code AZ 85716	Transaction ID: SA11AI.33956  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2499.97
Name of Employer HCR.ManorCare, Inc.  Receipt For:  Primary General  Other (specify) ▼	Occupation Regional Director of Operations Aggregate Year-to-Date  2499.97	Bi-Weekly Payroll Deduction
Full Name (Last, First, Middle Initial) Karen R Clark Mailing Address 1129 West Hunter		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.33959
Nevada	MO 64772	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	276.41  Bi-Weekly Payroll Deducti-
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	on
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 276.41	
Full Name (Last, First, Middle Initial) Lenette A Clark		Date of Receipt
Mailing Address 1259 Tower Court		0 6 2 9 2 0 1 1
City Bourbannais	State Zip Code IL 60914	Transaction ID: SA11AI.33960  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	459.00
Name of Employer HCR Manor Care, Inc	Occupation Administrator	Bi-Weekly Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 459.00	
SUBTOTAL of Receipts This Page (optional)		3235.38

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and cor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Bruce Clement Mailing Address 2145 Sawgrass Ln  City Pewaukee  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare	State Zip Code MI 53072  C Occupation Administrator	Date of Receipt    M M
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) William V Coury  Mailing Address 1640 Fairway Place L	n	Date of Receipt  Date of Receipt  D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11Al.33962
Mt. Pleasant  FEC ID number of contributing federal political committee.  Name of Employer	SC 29464  C Occupation	Amount of Each Receipt this Period  205.44  Bi-Weekly Payroll Deduction - 17.12
HCR Manor Care, Inc  Receipt For:  Primary  General  Other (specify) ▼	Administrator  Aggregate Year-to-Date ▼  205.44	011 - 17.12
Full Name (Last, First, Middle Initial) Lynn Creighton		Date of Receipt
Mailing Address 200 Commonwealth [	Or.	06 29 2011
City Bolingbrook	State Zip Code IL 60440	Transaction ID: SA11AI.33964 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	213.18
Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing	Bi-Weekly Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 213.18	
SUBTOTAL of Receipts This Page (optional) .	•	918.62

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for comme	ercial purposes, other than using the F COMMITTEE (In Full)	Statements may e name and add	rnot be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	anor Care PAC			
Ms. Victor	e (Last, First, Middle Initial) ia Crenshaw			Date of Receipt
	ddress 736 Va Dare Drive		7:01	06 29 2011
City <u>Virginia</u>	Beach	State VA	Zip Code 23451	Transaction ID: SA11AI.33965  Amount of Each Receipt this Period
	umber of contributing litical committee.	C		643.94
Name of HCR.Mar	Employer norCare, Inc.	Occupation	n Director of Operations	Bi-Weekly Payroll Deduction - 58.54
	or: nary General er (specify) ♥	<del>, '                                   </del>	Year-to-Date ▼ 643.94	
Full Name Johanna (	e (Last, First, Middle Initial) Crowder			Date of Receipt
Mailing A	ddress 31524 Delaware			0 6 2 9 2 0 1 1
City		State	Zip Code	Transaction ID: SA11AI.33966
	umber of contributing litical committee.	C	48150	Amount of Each Receipt this Period 438.48
Name of HCR. Ma	Employer nor Care, Inc	Occupation Manager	of Market Development	Bi-Weekly Payroll Deduction
	or: nary General er (specify)	<del>, '                                     </del>	Year-to-Date ▼ 438.48	
Full Name Karen Dav	e (Last, First, Middle Initial)	1		Date of Receipt
Mailing A	ddress 612 West Magnolia			06 29 7 2011
City Pana		State IL	Zip Code 62557	Transaction ID: SA11AI.33970
FEC ID n	umber of contributing	C	02337	Amount of Each Receipt this Period 508.00
Name of HCR Mar	Employer nor Care, Inc.	Occupation DCS - CI	n Inical Services	Bi-Weekly Payroll Deduction
	or: nary General er (specify) ▼	<del>, '</del>	Year-to-Date ▼ 508.00	
SURTOTAL	of Receipts This Page (optional)			1590.42

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms Carla Davis Hughes Mailing Address 745 Washington St. #603 City Toledo FEC ID number of contributing federal political committee.	State Zip Code OH 43604	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer HCR ManorCare, LLC  Receipt For: Primary General Other (specify)	Occupation VP Sales & Marketing Aggregate Year-to-Date  260.00	Bi-Weekly Payroll Deduction - 20.00
	Full Name (Last, First, Middle Initial) Dawn Jones Debrunner Mailing Address 14801 Farnham Way  City Tampa	State Zip Code FL 33624	Date of Receipt    M M M
	FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General  Other (specify)	Occupation Administrator - Carrollwood Aggregate Year-to-Date	250.00  Credit Card Contribution -
	Full Name (Last, First, Middle Initial) Janet Diehl Mailing Address 3903 Barbara Ann Driv	re	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City  Monroeville  FEC ID number of contributing federal political committee.	State Zip Code PA 15146	Transaction ID: SA11AI.33976  Amount of Each Receipt this Period  279.55
	Name of Employer HCR Manor Care, Inc  Receipt For:  Primary General Other (specify) ▼	Occupation Administrator  Aggregate Year-to-Date   279.55	Bi-Weekly Payroll Deduction
	SUBTOTAL of Receipts This Page (optional)		789.55

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A 0	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
$\angle$	HCR Manor Care PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. Larry Doenitz		Date of Receipt
	Mailing Address 3162 Crystal Court		05 13 7 2011
	City Lambertville	State Zip Code MI 48144	Transaction ID: SA11AI.33806
	FEC ID number of contributing federal political committee.	C 40144	Amount of Each Receipt this Period 400.00
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Ops Support	Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) David K Donin		Date of Receipt
	Mailing Address 11608 Everglade Cou	rt	0 6 2 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.33977
	North Potomac	MD 20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	420.00  Bi-Weekly Payroll Deducti-
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	on Dr Westily Fayton Bedden
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
	Full Name (Last, First, Middle Initial) Lisa J Dorrin		Date of Receipt
	Mailing Address 513 Oak Grove Road		06 29 2011
	City Swedesboro	State Zip Code NJ 08085	Transaction ID: SA11AI.33978
	FEC ID number of contributing federal political committee.	C 06065	Amount of Each Receipt this Period  247.13
	Name of Employer HCR Manor Care, Inc.	Occupation Admin Director of Nursing Services	Bi-Weekly Payroll Deduction - 19.01
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 247.13	
Γ,	SUBTOTAL of Receipts This Page (optional)	1	1067.13

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 78 (check only one)    X   11a
Ar	for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Ms Nancy Edwards		Date of Receipt
	Mailing Address 9261 Lerwick Dr		06 29 7 2011
	City	State Zip Code	Transaction ID: SA11AI.33979
	<u>Dublin</u>	OH 43017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2307.66
	Name of Employer HCR.ManorCare, Inc.	Occupation General Manager, Central Division	Bi-Weekly Payroll Deduction - 192
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	2307.66	
	Full Name (Last, First, Middle Initial) Mr. John Ehle		Date of Receipt
	Mailing Address 14400 Michaux View	Way	06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.33980
	Midlothian	VA 23113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	378.35
	Name of Employer HCR Manor Care, LLC.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	378.35	
_	Full Name (Last, First, Middle Initial) Linda J Emmett	1	Date of Receipt
	Mailing Address 10408 Meadowlark C	t. East	0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.33984
	Bonney Lake	WA 98391	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	360.00
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Deduction - 30.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
			3046.01

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any persenance name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
۸.	Full Name (Last, First, Middle Initial) R Michael Ferguson		Date of Receipt
	Mailing Address 2450 Underhill Rd		06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.33986
	Toledo	OH 43615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	519.21
	Name of Employer HCR ManorCare Inc.	Occupation VP & Dir of Purchasing	Bi-Weekly Payroll Deducti- on - 57.69
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	519.21	
	Full Name (Last, First, Middle Initial) Karen L Forrest		Date of Receipt
	Mailing Address 3115 Wynstone Dr		0 6 2 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.34237
	Quincy	IL 62305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	450.00  Bi-Weekly Payroll Deducti-
	Name of Employer HCR ManorCare Inc.	Occupation  Regional Director of Operation	on - 50.00
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	450.00	
	Full Name (Last, First, Middle Initial) A. Louise Forsha		Date of Receipt
	Mailing Address P. O. Box 418		$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$
	City	State Zip Code	Transaction ID: SA11AI.33771
	Albrightsville	PA 18210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator - Hampton House	Contribution
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	¬ [
	Other (specify) ▼	300.00	
Γ	NIDTOTAL of Descripts This Days (actional)		1269.21

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 78 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	I Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) George Frill Mailing Address 2006 Hale Ct  City Wyomiseing  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code PA 19610  C  Occupation Administrator - Laureldale Aggregate Year-to-Date  308.89	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Sally Gates  Mailing Address 2011 20th Lane  City Palm Beach Gardens  FEC ID number of contributing federal political committee.  Name of Employer HCR.ManorCare, Inc.  Receipt For: Primary General Other (specify)	State Zip Code FL 33418  C  Occupation Regional Director of Operations  Aggregate Year-to-Date  260.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Gary T. Geise  Mailing Address 28561 Woodland Av  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43551  C  Occupation Director of Reimbursement  Aggregate Year-to-Date  619.83	Date of Receipt    M   M   29   2011   Transaction ID: SA11AI.33998   Amount of Each Receipt this Period   619.83    Bi-Weekly Payroll Deduction   19.83
SUBTOTAL of Receipts This Page (optional)		1188.72

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
nny information copied from such Reports and some reports	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Lynda Gluch		Date of Receipt
Mailing Address 8740 Paulina Avenue		04 21 2011
City Grosse Ile	State Zip Code MI 48138	Transaction ID: SA11AI.33752  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer HCR.ManorCare, Inc.	Occupation Director of Dietary Services	Credit Card Contribution - AMEX
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Mr. Leonard Grabijas		Date of Receipt
Mailing Address 2682 Ravine Side Nor	th	06 29 2011
City	State Zip Code	Transaction ID: SA11AI.34007
Howell	MI 48843	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	— Bi-Weekly Payroll Deducti-
Name of Employer HCR Manor Care, LLC.	Occupation VP Sales & Mkting	on Di-Weekly Payroll Deducti-
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	643.35	
Full Name (Last, First, Middle Initial) James Grady	I	Date of Receipt
Mailing Address 1311 Old Taylor Trail		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.34008
Goshen	KY 40026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	513.00
Name of Employer HCR Manor Care Inc	Occupation Regional Director of Operations	Bi-Weekly Payroll Deduction - 57.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 513.00	
SUBTOTAL of Receipts This Page (optional) .		2656.35

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 78 (check only one)    X
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u> </u>	HCR Manor Care PAC  Full Name (Last, First, Middle Initial) Mr. John Graham		Date of Receipt
Α.	Mailing Address 3000 Riva Ridge Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Toledo</u>	State Zip Code OH 43615	Transaction ID: SA11AI.33636
	FEC ID number of contributing federal political committee.	OH 43615	Amount of Each Receipt this Period 5000.00
	Name of Employer HCR.ManorCare, Inc.	Occupation VP/GM - Heartland Hospice	contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
 3.	Full Name (Last, First, Middle Initial) Ruth G Graziano		Date of Receipt
	Mailing Address 503 Elk Mills Road		06 28 2011
	City	State Zip Code	Transaction ID: SA11AI.34236
	Oxford	PA 19363	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	825.00  Bi-Weekly Payroll Deducti-
	Name of Employer HCR ManorCare Inc.	Occupation  Regional Director of Operation	on
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	
- ;.	Full Name (Last, First, Middle Initial) Jill L Hale		Date of Receipt
	Mailing Address 366 Burlington Rd		06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.34016
	Jackson  FEC ID number of contributing federal political committee.	OH 45640	Amount of Each Receipt this Period  220.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction - 20.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  220.00	
	SUBTOTAL of Receipts This Page (optional)		6045.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any peen and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Ms Gayla M Haley		Date of Receipt
	Mailing Address 239 County Rd City	State Zip Code	0 6 2 9 2 0 1 1 Transaction ID: SA11AI.34017
	<u>Tenaha</u>	TX 75974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	342.60
	Name of Employer HCR ManorCare, LLC  Receipt For:  Primary General Other (specify) ▼	Occupation Administrator  Aggregate Year-to-Date ▼  342.60	Bi-Weekly Payroll Deduction
_	Full Name (Last, First, Middle Initial) Mr. Jeffrey Harris  Mailing Address 25536 Seminary Rd		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.34019
	Perrysburg	OH 43551	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	240.00
	Name of Employer HCR Manor Care, LLC.	Occupation AVP Dir of Tech Svcs	Bi-Weekly Payroll Deduction - 40.00
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	240.00	
	Full Name (Last, First, Middle Initial) Karen Harris	1	Date of Receipt
	Mailing Address 8250 SW 8th St		06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.34020
	North Lauderdale	FL 33068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	345.45
	Name of Employer HCR ManorCare Inc.	Occupation Assistant Administrator	Bi-Weekly Payroll Deducti-
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  345.45	
	SUBTOTAL of Receipts This Page (optional) .	•	928.05

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 78 (check only one)    X
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) Mr. Alan Hash		Date of Receipt
	Mailing Address 9496 South Dunbar C		0 6 2 9 2 0 1 1 2 CA11AL 24000
	City <u>South Jordan</u>	State Zip Code  UT 84095	Transaction ID: SA11AI.34022  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	957.67
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼	Occupation Regional Director - Western Division Aggregate Year-to-Date   957.67	Bi-Weekly Payroll Deducti-
	Full Name (Last, First, Middle Initial) Tammy R Hempfling Mailing Address 301 Broadhead		Date of Receipt
	City	State Zip Code	0 6 2 9 2 0 1 1 Transaction ID: SA11AI.34025
	Midland	MI 40642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	293.02
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction - 22.54
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  293.02	
_	Full Name (Last, First, Middle Initial) Kevin C Henricks		Date of Receipt
	Mailing Address 23636 W. Chicago St	. Unit 102	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Plainfield	State Zip Code IL 60544	Transaction ID: SA11AI.34235  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	444.00
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 444.00	
Γ	SURTOTAL of Receipts This Page (optional)		1694.69

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ai	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Donnett H Henry		Date of Receipt
	Mailing Address 7531 Plantation		0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34027
	Mirimar	FL 33023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	219.60
	Name of Employer HCR Manor Care, Inc.	Occupation	Bi-Weekly Payroll Deduction - 18.51
	Receipt For:	Director of Nursing  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	219.60	
_	Full Name (Last, First, Middle Initial) Elizabeth B. Hill	Date of Receipt	
	Mailing Address 1285 Sunhill Drive	06 29 2011	
	City	State Zip Code	Transaction ID: SA11AI.34029
	Lawrenceville	GA 30043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	210.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction - 17.50
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
_	Full Name (Last, First, Middle Initial) Sharon E Hollins	I.	Date of Receipt
	Mailing Address 3311 Gallatin Rd	0 4 0 7 2 0 1 1	
	City	State Zip Code	Transaction ID: SA11AI.33702
	Toledo	OH 43606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1200.00
	Name of Employer HCR ManorCare Inc.	Occupation Assistant General Counsel	Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	1200.00	
			1629.60

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 26 / 78 (check only one)    X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be e name and address of	sold or used by any personal sold or used by any personal committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <b>\</b> .	Full Name (Last, First, Middle Initial) Sharon R Holmes Mailing Address 3207 N. 27th St.			Date of Receipt
	City Tacoma		o Code 3407	0 6 2 9 2 0 1 1 Transaction ID: SA11Al.34035
	FEC ID number of contributing federal political committee.	C	3407	Amount of Each Receipt this Period  305.00
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼	Occupation Administrator in Aggregate Year-to		Bi-Weekly Payroll Deduction - 25.00
3.	Full Name (Last, First, Middle Initial) Lynn M Hood Mailing Address 15415 Meadow Wood	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y		
	City		o Code	Transaction ID: SA11AI.34037
	Wellington FEC ID number of contributing federal political committee.	C	3414	Amount of Each Receipt this Period  1080.00  Bi-Weekly Payroll Deducti-
	Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)	Occupation Asst General M Aggregate Year-to	<u> </u>	on - 90.00
	Full Name (Last, First, Middle Initial) Ms Kate Gieroczynski Huck	Date of Receipt		
	Mailing Address 65 Washington St	06 29 2011		
	City Topton		o Code 9562	Transaction ID: SA11AI.34040
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  200.81	
	Name of Employer HCR ManorCare, LLC	Occupation Administrator		Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 200.81	
	SUBTOTAL of Receipts This Page (optional)			1585.81

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	statements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Patricia Hudson  Mailing Address 1733 Ashfield Dr  City Maumee  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43537  C  Occupation Reg. Director of 4H  Aggregate Year-to-Date ▼  325.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Kathleen Hutchison  Mailing Address 2692 Elton Circle  City  Lambertville  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48144  C  Occupation Director Human Resources Ops Supp Aggregate Year-to-Date  260.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Rebecca S Jablon  Mailing Address 3349 Fairbanks Ave  City TOLEDO  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43615  C  Occupation Admin Dir Of Nursing Serv  Aggregate Year-to-Date  210.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: SA11AI.34234  Amount of Each Receipt this Period  210.00  Bi-Weekly Payroll Deduction - 42.00
SUBTOTAL of Receipts This Page (optional)	<b></b>	795.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 28 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold on the name and address of any positions.	or used by any person olitical committee to s	for the purpose of soliciting contributions
HCR Manor Care PAC			
Full Name (Last, First, Middle Initial)			Data of Bassist
Mailing Address 3321 Pelham Rd			Date of Receipt  0 6 2 9 2 0 1 1
City	State Zip Code	)	Transaction ID: SA11AI.34054
Ottawa Hills	OH 43606		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1	388.00
Name of Employer HCR Manor Care, Inc.	Occupation Mgr. Business Office	Process Dev.	Bi-Weekly Payroll Deducti- on
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	388.00	
Full Name (Last, First, Middle Initial) Susan M Kalas			Date of Receipt
Mailing Address 10921 Cortland Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	<b>;</b>	Transaction ID: SA11AI.34057
Huntley	IL 60142		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		243.71
Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing		Bi-Weekly Payroll Deducti- on
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	243.71	
Full Name (Last, First, Middle Initial) Linda Karling-Lott	1		Date of Receipt
Mailing Address 4361 Conrwallis Ct			0 6 2 9 / Y Y Y Y Y
City	State Zip Code	)	Transaction ID: SA11AI.34059
Marietta	GA 30068		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.50
Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Bi-Weekly Payroll Deducti- on - 32.75
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	327.50	
SUBTOTAL of Receipts This Page (optional).			959.21

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
\ \ \	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial) Anthony J Keelin			Date of Receipt
	Mailing Address 2208 26th Avenue^ S			06 29 2011
	City <u>Fargo</u>	State ND	Zip Code 58103	Transaction ID: SA11AI.34063  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Bi-Weekly Payroll Deduction - 25.00
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 325.00	
_	Full Name (Last, First, Middle Initial) Dan Kight	Date of Receipt		
	Mailing Address 2013 Orchard Rd	06 29 2011		
	City	State	Zip Code	Transaction ID: SA11AI.34066
	Toledo FEC ID number of contributing federal political committee.	ОН	43606	Amount of Each Receipt this Period 250.00
	Name of Employer HCR ManorCare Inc.	Occupation Mgr^ Pha	n armacy Ops Sprt	Bi-Weekly Payroll Deduction - 25.00
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Vivian Kiraly			Date of Receipt
	Mailing Address 4254 Waterbend Driv	0 6 29 2011		
	City Maumee	State OH	Zip Code 43537	Transaction ID: SA11AI.34068  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10007	325.00
	Name of Employer HCR Manor Care, Inc. Administrator			Bi-Weekly Payroll Deduction - 25.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional)	1		900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	λ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 30 / 78   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		, , ,	
Full Name (Last, First, Middle Initial) Amy LaFleur			Date of Receipt
Mailing Address 207 S. Ann Arbor S	t.		0 6 2 9 2 0 1 1
City Saline	State MI	Zip Code	Transaction ID: SA11AI.34077
FEC ID number of contributing federal political committee.	C	48176	Amount of Each Receipt this Period  230.00
Name of Employer HCR. Manor Care, Inc	Occupation Regional	n Director of Operations	Bi-Weekly Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) Barry Lazarus			Date of Receipt
Mailing Address 2629 Liverpool Cou	0 6 2 9 2 0 1 1		
City Toledo	State OH	Zip Code 43617	Transaction ID: SA11AI.34080  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1022.00
Name of Employer HCR.Manor Care, Inc.	Occupation	n mbursement	Bi-Weekly Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1022.00	
Full Name (Last, First, Middle Initial) Mr. Elliot Lekawa			Date of Receipt
Mailing Address 13690 Highland Sp	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Wichita	State KS	Zip Code	Transaction ID: SA11AI.34081
FEC ID number of contributing federal political committee.	C	67235	Amount of Each Receipt this Period  371.55
Name of Employer HCR Manor Care, LLC.	Occupation RDO	1	Bi-Weekly Payroll Deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 371.55	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1623.55

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse e name and address of any political committee to	son for the purpose of soliciting contributions
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Carrie Lund Mailing Address 14802 Dunston Place		Date of Receipt
14002 Durision Flace		06 29 2011
City	State Zip Code	Transaction ID: SA11AI.34089
Tampa	FL 33618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	598.00
Name of Employer HCR Manor Care, Inc.	Occupation Sr. Administrator - Palm Harbor	Bi-Weekly Payroll Deducti- on -46.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 598.00	
Full Name (Last, First, Middle Initial) Sephanie M Marcotullio		Date of Receipt
Mailing Address 49895 Waterstone Es	0 6 2 9 Y Y Y Y Y	
City	State Zip Code	Transaction ID: SA11AI.34090
Northville	MI 48168	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	255.90
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deducti- on
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.90	
Full Name (Last, First, Middle Initial) Joya Marotta	Date of Receipt	
Mailing Address 1037 NW 18th Avenu	e	04 12 2011
City	State Zip Code	Transaction ID: SA11AI.33708
Boca Raton	FL 33486	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SURTOTAL of Receipts This Page (optional)		1853.90

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 78 (check only one)    X
2	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
•	Full Name (Last, First, Middle Initial) Laverne M Martin		Date of Receipt
	Mailing Address 8232 Ridge Run Plac		06 29 2011
	City Mechanicsville	State Zip Code PA 23116	Transaction ID: SA11AI.34093  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	254.54
	Name of Employer HCR Manor Care, Inc	Occupation Admin Dir Of Nursing Services	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  254.54	
_	Full Name (Last, First, Middle Initial) Frances Mastel		Date of Receipt
	Mailing Address 1807 Derian Drive	0 6 2 9 2 0 1 1	
	City	State Zip Code	Transaction ID: SA11AI.34099
	Aberdeen	SD 57401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	210.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
_	Full Name (Last, First, Middle Initial) Ms. Janet Mastrangelo (Howells)		Date of Receipt
	Mailing Address 266 Crossing Creek N	03 11 2011	
	Cabana	State Zip Code	Transaction ID: SA11AI.33659
	Gahanna FEC ID number of contributing federal political committee.	OH 43230	Amount of Each Receipt this Period  2000.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Assistant Vice President of Rehab	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Г	SUBTOTAL of Receipts This Page (optional)	ı	2464.54

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	ry of the
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	tatements may not be sold or used name and address of any political	d by any person for the purpose of soliciting contributions all committee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		Data of Dassiet
<b>A.</b>	Ms. Janet Mastrangelo (Howells)  Mailing Address 266 Crossing Creek N		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code OH 43230	Transaction ID: SA11AI.34100
	Gahanna FEC ID number of contributing federal political committee.	OH 43230	Amount of Each Receipt this Period 415.40
	Name of Employer HCR.ManorCare, Inc.	Occupation Assistant Vice President	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	- I	2415.40
_ 3.	Full Name (Last, First, Middle Initial) Jill Matelan Mailing Address 312 N. Franklin St		Date of Receipt
			06 29 2011
	City Fleetwood	State Zip Code PA 19522	Transaction ID: SA11AI.34101
	FEC ID number of contributing federal political committee.	PA 19522	Amount of Each Receipt this Period  363.74
	Name of Employer HCR Manor Care, Inc	Occupation Administrator - Sinking S	Bi-Weekly Payroll Deduction - 29.78
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	363.74
. –	Full Name (Last, First, Middle Initial) Robert E McQuillan	L	Date of Receipt
	Mailing Address 604 Stoney Run Road	$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y \\ 0 & 4 & & 1 & 2 & & 2 & 0 & 1 & 1 \end{bmatrix}$	
	City	State Zip Code	Transaction ID: SA11AI.33709
	Pottsville	PA 17901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00 Contribution
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Oper	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	500.00
	SUBTOTAL of Receipts This Page (optional)		1279.14

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 78 (check only one)    X   11a
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Murry Mercier Mailing Address 7110 Oak Bluff Lane City Maumee FEC ID number of contributing federal political committee.	State OH	Zip Code 43537	Date of Receipt  O 6 29 2011  Transaction ID: SA11AI.34106  Amount of Each Receipt this Period
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼		rmation Systems Year-to-Date  2500.03	Bi-Weekly Payroll Deduction - 192.31
-	Full Name (Last, First, Middle Initial) Scott Miller Mailing Address 198 Old Mill Drive City Langhorne	State PA	Zip Code 19047	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)	Occupation Sr Admin Aggregate		Bi-Weekly Payroll Deduction - 51.35
	Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street	Date of Receipt  0 4 1 5 2 0 1 1		
	City Perrysburg FEC ID number of contributing federal political committee.	State OH	Zip Code 43551	Transaction ID: SA11AI.33767  Amount of Each Receipt this Period  500.00
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼	<del>- '</del>	n entral Division  Year-to-Date ▼  500.00	Contribution
s	UBTOTAL of Receipts This Page (optional)			3513.53

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
An	y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may ne name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms Susan Morey			Date of Receipt
	Mailing Address 308 Shelly Drive	Otata.	7:a Cada	05 27 2011
	City Sinking Spring	State PA	Zip Code 19608	Transaction ID: SA11AI.33841  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10000	1000.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Regional	Director of Operations	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Melinda K Muller	Date of Receipt		
	Mailing Address 1261 Lakeside Drive	06 29 2011		
	City	State	Zip Code	Transaction ID: SA11AI.34118
	Sunnyvale	CA	94085	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer HCR Manor Care Inc	Occupation Administr		Bi-Weekly Payroll Deduction - 35.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
	Full Name (Last, First, Middle Initial) Terrance Murphy			Date of Receipt
	Mailing Address 2379 Schaffer Road	0 6 2 9 7 Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11AI.34122
	Pottstown  FEC ID number of contributing federal political committee.	C	19464	Amount of Each Receipt this Period 326.42
	Name of Employer HCR Manor Care, Inc.	Occupation Administr		Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 326.42	
	UBTOTAL of Receipts This Page (optional) .	1		1536.42

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 78 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Tom Myers  Mailing Address 24927 Prairie Crossing  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General	State Zip Code OH 43551  C  Occupation Director of Ops Support - Central Aggregate Year-to-Date	Date of Receipt    M M M
Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms Joylin Nation  Mailing Address 15985 Voyageurs Place  City  West Palm Beach  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code FL 33414  C  Occupation Senior Administrator  Aggregate Year-to-Date  499.98	Date of Receipt    M M   D D   29   2011   Transaction ID: SA11AI.34124   Amount of Each Receipt this Period   499.98    Bi-Weekly Payroll Deduction - 38.46
Full Name (Last, First, Middle Initial) David K Nees  Mailing Address 5315 Rymoor Drive  City Sylvania  FEC ID number of contributing federal political committee.  Name of Employer HCR. Manor Care, Inc  Receipt For: Primary General Other (specify)	State Zip Code OH 43560  C  Occupation Associate General Counsel  Aggregate Year-to-Date   1180.54	Date of Receipt    M   M   29   2011   Transaction ID: SA11AI.34125   Amount of Each Receipt this Period   1180.54    Bi-Weekly Payroll Deduction   1180.54
SUBTOTAL of Receipts This Page (optional)		2040.52

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
7	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used be name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	HCR Manor Care PAC		
1	Full Name (Last, First, Middle Initial) Linda Neumann		Date of Receipt
	Mailing Address 28 Roslyn Road		06 29 2011
	City Grosse Pointe Shor	State Zip Code MI 48236	Transaction ID: SA11AI.34126
	FEC ID number of contributing federal political committee.	C 40230	Amount of Each Receipt this Period 999.96
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operat	Bi-Weekly Payroll Deduction - 76.92
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	99.96
_	Full Name (Last, First, Middle Initial) Eric O'Neill	I	Date of Receipt
	Mailing Address 4009 East Braeburn [	)r	0 6 2 8 2 0 1 1
	City	State Zip Code	Transaction ID: SA11Al.34312
	<u>Appleton</u>	WI 54913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	265.38
	Name of Employer HCR ManorCare	Occupation Regional Director of Operat	Bi-Weekly Payroll Deduction - 44.23
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	20	55.38
	Full Name (Last, First, Middle Initial) Ms Leslie Ohm		Date of Receipt
	Mailing Address 12331 South 71st Av	enue	0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34131
	Palos Heights	IL 60463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	346.20  Bi-Weekly Payroll Deducti-
	Name of Employer HCR.ManorCare, Inc.	Occupation Regional Director of Operat	l on
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	46.20
	SUBTOTAL of Receipts This Page (optional)	1	1611.54

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael Orinoco  Mailing Address 1361 Bobby Lane  City Westlake  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, LLC.  Receipt For: Primary General	State Zip Code OH 44145  C  Occupation Administrator  Aggregate Year-to-Date ▼	Date of Receipt    M   M   D   D   2 9   2 0 1 1
	Other (specify) ▼  Full Name (Last, First, Middle Initial)  Ms. Annette Orlowski  Mailing Address 2664 Heytman Dr  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer HCR.ManorCare, Inc.  Receipt For:  Primary General  Other (specify) ▼	State Zip Code IA 52151  C  Occupation Director, Clinical Services Aggregate Year-to-Date   844.09	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 / 2 9 / 2 0 1 1  Transaction ID: SA11AI.34136  Amount of Each Receipt this Period  844.09  Bi-Weekly Payroll Deduction - 64.93
<u> </u>	Full Name (Last, First, Middle Initial) Paul A. Ormond  Mailing Address 2420 Underhill Road  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer HCR.ManorCare, Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43615  C  Occupation Chairman President/CEO Aggregate Year-to-Date ▼  5000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)	<b></b>	6105.61

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Susan Ormond  Mailing Address 2420 Underhill Road		Date of Receipt
City	State Zip Code	0 1 1 0 2 0 1 1 Transaction ID: SA11AI.33632
Toledo	OH 43615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer HCR Manor Care, Inc.	Occupation CEO Admin Asst.	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) Ann E Otley	<u> </u>	Date of Receipt
Mailing Address 333 W Wooster St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11Al.34137
Bowling Green	OH 43402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer HCR ManorCare Inc.	Occupation Director of Corporate Benefits	Bi-Weekly Payroll Deduction - 25.00
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Brett Ottley		Date of Receipt
Mailing Address 11240 Messina Way		06 29 2011
City	State Zip Code NV 89521	Transaction ID: SA11AI.34138
Reno		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	385.36  Bi-Weekly Payroll Deducti-
Name of Employer HCR Manor Care, LLC.	Occupation Administrator	on
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	385.36	
SUBTOTAL of Receipts This Page (optional)		5685.36

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
\ \ \	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers ne name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
/	HCR Manor Care PAC		
۹.	Full Name (Last, First, Middle Initial)  Mr. James Pagoaga  Mailing Address 21 Winding Creek Dr	li a	Date of Receipt
	City	State Zip Code	01 19 2011 Transaction ID SA11AL 22625
	<u>Sylvania</u>	OH 43560	Transaction ID: SA11AI.33635  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Vice President, Rehabilitation	Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. David Parker		Date of Receipt
	Mailing Address 2154 Tremont Road		06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.34139
	Columbus  FEC ID number of contributing federal political committee.	OH 43212	Amount of Each Receipt this Period  1604.83
	Name of Employer HCR.ManorCare, Inc.	Occupation VP Assistant General Manager	Bi-Weekly Payroll Deduction - 3.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1604.83	
. –	Full Name (Last, First, Middle Initial) Richard A Parr II		Date of Receipt
	Mailing Address 2253 Gray Fox Court		0 6 2 9 2 0 1 1
	City Ann Arbor	State Zip Code MI 48103	Transaction ID: SA11AI.34140
	FEC ID number of contributing federal political committee.	MI 48103	Amount of Each Receipt this Period  1344.00
	Name of Employer HCR Manor Care, Inc.	Occupation VP - General Counsel & Secretary	Bi-Weekly Payroll Deduction - 192.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	
	CURTOTAL of Descints This Dags (antional)		7948.83

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e (crieck offly offe)
A or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by are e name and address of any political comn	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	HCR Manor Care PAC		
-	Full Name (Last, First, Middle Initial) Ms Karen Phelps		Date of Receipt
	Mailing Address Route 4, Box 87P		06 29 7 2011
	City	State Zip Code	Transaction ID: SA11AI.34142
	Tecumseh	OK 74873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	390.00
	Name of Employer HCR.ManorCare, Inc.	Occupation  Manager Clinical Services	Bi-Weekly Payroll Deduction - 30.00
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	390.0	00
_	Full Name (Last, First, Middle Initial) Luke T Pile		Date of Receipt
	Mailing Address 716B Main St		06 29 2011
	City	State Zip Code	Transaction ID: SA11AI.34143
	Bethlehem	PA 18018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	301.86
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction - 23.22
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	301.8	86
	Full Name (Last, First, Middle Initial) Clifton J Porter II		Date of Receipt
	Mailing Address 3929 Azalea Circle		M M / D D / Y Y Y Y Y O D D / Z 8 Z 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34232
	Maumee	OH 43537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	851.64
	Name of Employer HCR ManorCare Inc.	Occupation  AVP^ Government Relations	Bi-Weekly Payroll Deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	851.6	64
Г			1543.50

Γ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS  Any information copied from such Reports and St	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 78  (check only one)    X   11a
	ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and address of any political committee t	o solicit contributions from such committee.
∠ <b>4.</b>	Full Name (Last, First, Middle Initial) Michael J Reed  Mailing Address 3899 Midshore Drive		Date of Receipt  0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34148
	Naples  FEC ID number of contributing federal political committee.	FL 34109	Amount of Each Receipt this Period 2499.97
	Name of Employer HCR Manor Care, Inc.  Receipt For:  Primary General Other (specify) ▼	Occupation VP Assisted Living Operations Aggregate Year-to-Date  2499.97	Bi-Weekly Payroll Deduction - 192
_ 3.	Full Name (Last, First, Middle Initial) Mr. Stewart Reed Mailing Address 402 Wesley Dr		Date of Receipt  0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11Al.34149
	Salisbury	NC 28146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	273.07
	Name of Employer HCR Manor Care, LLC.	Occupation RDO	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 273.07	
	Full Name (Last, First, Middle Initial) Margaret A Reitmeyer Mailing Address 13 Gregory Drive		Date of Receipt  0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34150
	Kenvil FEC ID number of contributing federal political committee.	NJ 07847	Amount of Each Receipt this Period  444.00
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Deduction - 37.00
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 444.00	
	SUBTOTAL of Receipts This Page (optional)		3217.04

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Deborah A Reitz  Mailing Address 4312 Shangri La Rd.  City Stewartstown  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code PA 17363  C  Occupation Regional Director of Ops  Aggregate Year-to-Date ▼  550.00	Date of Receipt  M M D 29 2011  Transaction ID: SA11AI.34151  Amount of Each Receipt this Period  550.00  Bi-Weekly Payroll Deduction
Full Name (Last, First, Middle Initial) John Remenar Mailing Address 2723 Rexton Ridge  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43617  C  Occupation VP/Director - Financial Services Aggregate Year-to-Date   1907.74	Date of Receipt  M M M / 29 2011  Transaction ID: SA11AI.34152  Amount of Each Receipt this Period  1907.74  Bi-Weekly Payroll Deduction
Full Name (Last, First, Middle Initial) Patricia B Richards  Mailing Address P.O. Box 754  City Shady Spring  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code WV 25918  C  Occupation Area Human Resource Director  Aggregate Year-to-Date  303.80	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 2 9 2 0 1 1  Transaction ID: SA11AI.34156  Amount of Each Receipt this Period  303.80  Bi-Weekly Payroll Deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2761.54

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) HCR Manor Care PAC	nd Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Susan Ringenberg Mailing Address 6073 Wedgewood  City Lake Worth  FEC ID number of contributing	State Zip Code FL 33463	Date of Receipt    M M
federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	Occupation Director Nutrition Consulting Services  Aggregate Year-to-Date   250.00	250.00 Contribution
Full Name (Last, First, Middle Initial) Damian M Rodgers Mailing Address 4647 Calico Court  City Monclova  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General	State Zip Code OH 43542  C  Occupation Legal Counsel  Aggregate Year-to-Date  494.00	Date of Receipt  M M Z 9 Z 0 1 1  Transaction ID: SA11AI.34157  Amount of Each Receipt this Period  494.00  Bi-Weekly Payroll Deduction - 38.00
Full Name (Last, First, Middle Initial) David R Roth Mailing Address 5257 Bentwood Dri  City Mason  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For:  Primary General Other (specify) ▼		Date of Receipt    M   M   29   2011   Transaction ID: SA11AI.34160   Amount of Each Receipt this Period   350.00    Bi-Weekly Payroll Deduction - 50.00
SUBTOTAL of Receipts This Page (optional	)l	1094.00

SCHEDULE A ( ITEMIZED REC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 78 (check only one)    X
Any information copied or for commercial purpo  NAME OF COMMIT  HCR Manor Care	ses, other than using the name and a TEE (In Full)	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First Mr. Rick Rump Mailing Address 2.4  City Maumee  FEC ID number of confederal political commod Employer HCR.ManorCare, Inc.  Receipt For:  Primary Other (specify)	State OH Ontributing nittee.  Occupa Director Aggrega	Zip Code 43537  tion or of Corporate Communication ate Year-to-Date ▼  713.89	Date of Receipt    M M M   D D   29   2011   Transaction ID: SA11AI.34162   Amount of Each Receipt this Period   713.89    Bi-Weekly Payroll Deduction - 55.58
	950 Cypress Pike Circle nit 101  State VA  ontributing nittee.  C.  Occupa Gen M  Aggrega	Zip Code 23455  tion gr Central Div 4H ate Year-to-Date ▼ 403.00	Date of Receipt  M M M 29 2011  Transaction ID: SA11AI.34163  Amount of Each Receipt this Period  403.00  Bi-Weekly Payroll Deduction - 31.00
Full Name (Last, First David A Saunders Mailing Address 1 A City Bonita Springs  FEC ID number of confederal political common Name of Employer HCR ManorCare Incomplete Primary Other (specify)	State FL Ontributing nittee.  Occupa Admini Aggrega		Date of Receipt  M M M 29 29 2011  Transaction ID: SA11AI.34167  Amount of Each Receipt this Period  259.30  Bi-Weekly Payroll Deduction
SUBTOTAL of Receip	s This Page (optional)		1376.19

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 78 (check only one)    X
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	Statements may not be sold or used by any pe name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Cynthia S Scharp		Date of Receipt
	Mailing Address 1627 N. 1100 E  City	State Zip Code	0 6 2 9 2 0 1 1  Transaction ID: SA11AI.34168
	Gilman FEC ID number of contributing federal political committee.	IL 60938	Amount of Each Receipt this Period 300.00
	Name of Employer HCR ManorCare Inc.  Receipt For:  Primary  Other (specify) ▼	Occupation Sr Administrator  Aggregate Year-to-Date ▼  300.00	Bi-Weekly Payroll Deducti- on - 25.00
	Full Name (Last, First, Middle Initial) Deborah Schlosser  Mailing Address 2432 21st Street		Date of Receipt
	City	State Zip Code	0 6 2 8 2 0 1 1 Transaction ID: SA11AI.34324
	Wyandotte	MI 48192	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	452.92
	Name of Employer HCR ManorCare	Occupation Regional Director of Operation	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 452.92	
_	Full Name (Last, First, Middle Initial) Mr. Mark Schroepfer		Date of Receipt
	Mailing Address 2328 Bonnie Brae		06 29 7 2011
	City Santa Ana	State Zip Code CA 92706	Transaction ID: SA11AI.34169  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction - 25.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  325.00	•
Γ,	SUBTOTAL of Receipts This Page (optional) .	1	1077.92

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 78 (check only one)    X   11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any peen ame and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		
	Mr. Edward Schuch  Mailing Address 304 Adriana Court		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City Northhampton	State Zip Code PA 18067	Transaction ID: SA11AI.34170  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deducti- on - 25.00
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 325.00	
_	Full Name (Last, First, Middle Initial) Ms Elizabeth Schupp		Date of Receipt
	Mailing Address 1022 Oakview Drive		03 24 2011
	City	State Zip Code	Transaction ID: SA11AI.33688
	Highland Heights	OH 44143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	750.00 contribution
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	750.00	
	Full Name (Last, First, Middle Initial) Kenneth P Schuster		Date of Receipt
	Mailing Address 2074 Cameo		06 29 2011
	City Lewisville	State Zip Code TX 75067	Transaction ID: SA11AI.34171  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deducti- on - 25.00
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1325.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Susan Sexton  Mailing Address 7645 Yawberg Road  City Whitehouse  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code OH 43571  C  Occupation Senior Manager - Tax Aggregate Year-to-Date  241.75	Date of Receipt  M M M J D D J Z D 1 1  Transaction ID: SA11AI.33901  Amount of Each Receipt this Period  241.75  Credit Card Contribution -  DSC
Full Name (Last, First, Middle Initial) Katie Slench Mailing Address 7492 E Plank Trail Ct  City Frankfort  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify)	State Zip Code IL 60423  C  Occupation Reg Resident Assessment Coordinato Aggregate Year-to-Date  205.62	Date of Receipt    M   M   D   D   2 9   2 0 1 1     Transaction ID: SA11AI.34176   Amount of Each Receipt this Period   205.62     Bi-Weekly Payroll Deduction
Full Name (Last, First, Middle Initial) Theresa J Smelser  Mailing Address 202 N. Elm Hurst Rd.  City Prospect Heights  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)	State Zip Code IL 60070  C  Occupation Sr Administrator Aggregate Year-to-Date  330.00	Date of Receipt    M   M   D   D   Q   Q   D   Q   D
SUBTOTAL of Receipts This Page (optional)	<b>)</b>	777.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 78 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Joyce Louise Smith  Mailing Address 3521 Cedar Creek Cou  City  Maumee  FEC ID number of contributing federal political committee.  Name of Employer HCR.ManorCare, Inc.  Receipt For:  Primary  General  Other (specify)	State Zip Code OH 43537  C  Occupation Vice President, Director Clinical Servagregate Year-to-Date  680.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Patrica Smith  Mailing Address 3644 Chesterton Dr  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer HCR. Manor Care, Inc  Receipt For: Primary General Other (specify)	State Zip Code OH 43615  C  Occupation Director of Nursing  Aggregate Year-to-Date  250.00	Date of Receipt  M M / D D / Y Y Y Y Y  Transaction ID: SA11AI.33810  Amount of Each Receipt this Period  250.00  Contribution
Full Name (Last, First, Middle Initial) Patrica Smith  Mailing Address 3644 Chesterton Dr  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer HCR. Manor Care, Inc  Receipt For: Primary General Other (specify)	State Zip Code OH 43615  C  Occupation Director of Nursing  Aggregate Year-to-Date  310.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 6 28 2011  Transaction ID: SA11AI.34231  Amount of Each Receipt this Period  60.00  Bi-Weekly Payroll Deduction - 10.00
SUBTOTAL of Receipts This Page (optional)		990.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 78 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using a NAME OF COMMITTEE (In Full) HCR Manor Care PAC	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Marionlee J Specter  Mailing Address 5286 Sell Road			Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  New Tripoli  FEC ID number of contributing federal political committee.	State PA	Zip Code 18066	Transaction ID: SA11AI.34183  Amount of Each Receipt this Period  351.00
Name of Employer HCR ManorCare Inc.  Receipt For:  Primary General Other (specify) ▼		n e Director e Year-to-Date ▼ 351.00	Bi-Weekly Payroll Deduction - 27.00
Full Name (Last, First, Middle Initial) Steven D Spencer Mailing Address 1102 Towsley Ln  City	State	Zip Code	Date of Receipt  0 1 3 1 2 0 1 1  Transaction ID: SA11AI.33637
Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For:  Primary General  Other (specify)	<del></del> '	n an Resources e Year-to-Date ▼	Amount of Each Receipt this Period  1000.00  Contribution
Full Name (Last, First, Middle Initial) Mr. Alan Stewart Mailing Address 571 Dorado Dr			Date of Receipt
City Fairborn  FEC ID number of contributing federal political committee.	State OH	Zip Code 45324	Transaction ID: SA11AI.34187  Amount of Each Receipt this Period  260.00
Name of Employer HCR Manor Care, LLC.  Receipt For:  Primary General Other (specify) ▼		n e Relations Consultant e Year-to-Date ▼ 260.00	Bi-Weekly Payroll Deduction - 20.00
SUBTOTAL of Receipts This Page (optional)	)		1611.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  HCR Manor Care PAC	I Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
7 HON MAIIOI CAIE FAC		
Full Name (Last, First, Middle Initial) Jane L Stilwell		Date of Receipt
Mailing Address 2351 S. Rogers		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.34188
Springfield	MO 65804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer HCR Manor Care, Inc.	Occupation  Mobile Administrator	Bi-Weekly Payroll Deduction
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Anthony J Stinson		Date of Receipt
Mailing Address 3 Lynnefield Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.34189
Medford	NJ 08055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	233.84
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	233.84	
Full Name (Last, First, Middle Initial) Sherri L Stoltzfus	1	Date of Receipt
Mailing Address 119 East Manor Dr.		0 6 29 2011
City	State Zip Code	Transaction ID: SA11AI.34190
Lititz	PA 17543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	261.14
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	261.14	
		869.98

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for co	rmation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) R Manor Care PAC	tatements may name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full N	Jame (Last, First, Middle Initial) te Storck ng Address 28490 Wynikako Ave			Date of Receipt
City	·	State	Zip Code	0 6 2 9 2 0 1 1 Transaction ID: SA11Al.34191
	DORO  ID number of contributing all political committee.	DE C	19966	Amount of Each Receipt this Period  390.00
	e of Employer Manor Care, LLC.  ipt For:  Primary  General  Other (specify)	Occupation Administr Aggregate		Bi-Weekly Payroll Deduction - 30.00
Mr. E	Jame (Last, First, Middle Initial) ric Talbert ng Address 7231 Stonewater Ct	Date of Receipt  O 6 2 9 2 0 1 1		
City		State	Zip Code	Transaction ID: SA11AI.34197
	mee ID number of contributing al political committee.	ОН	43537	Amount of Each Receipt this Period  220.00  Bi-Weekly Payroll Deducti-
	e of Employer Manor Care, Inc.  ipt For: Primary General Other (specify)	r '	totor of Operations Support Year-to-Date ▼  220.00	on - 20.00
	Jame (Last, First, Middle Initial) i K Taplin			Date of Receipt
Mailir	ng Address 5023 W. 59th St			0 6 2 9 2 0 1 1
City	opport	State IA	Zip Code	Transaction ID: SA11AI.34198
FEC	enport  ID number of contributing al political committee.	C	52806	Amount of Each Receipt this Period  900.00
	e of Employer Manor Care, Inc.	Occupation Regional	n Director of Ops	Bi-Weekly Payroll Deduction
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	
SUBTO	TAL of Receipts This Page (optional)			1510.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
\ \	ny information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
<b>.</b> .	Full Name (Last, First, Middle Initial)  Ms Vicki Tomer  Mailing Address 500 Buckingham Place  City  Shorewood  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.	State Zip Code IL 60431  C Occupation	Date of Receipt  O 4 29 2011  Transaction ID: SA11AI.33786  Amount of Each Receipt this Period  1050.00  Contribution
	Receipt For: Primary General Other (specify)	Senior Administrator  Aggregate Year-to-Date ▼  1050.00	
	Full Name (Last, First, Middle Initial) Rami Ubaydi Mailing Address 6519 Chatham Circle		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.34207
	Rochester Hills	MI 48306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	797.60
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 797.60	
	Full Name (Last, First, Middle Initial) Ms Mary D. Wahl		Date of Receipt
	Mailing Address 3008 Drummond Road		06 17 7 2011
	City	State Zip Code	Transaction ID: SA11AI.33867
	Toledo FEC ID number of contributing federal political committee.	OH 43606	Amount of Each Receipt this Period 500.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Director, Corporate Services Mar	Contribution nagmnt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	CURTOTAL of Descipto This Dage (entires)		2347.60

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pere e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
_	Full Name (Last, First, Middle Initial) Toni Y Williams		Date of Receipt
	Mailing Address 141 Boiling Spring Cir	06 29 2011	
	City	State Zip Code	Transaction ID: SA11AI.34213
	Southern Pines	NC 28387	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	260.00
	Name of Employer HCR ManorCare Inc.	Occupation Admin Dir Of Nursing Serv	Bi-Weekly Payroll Deduction - 20.00
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
_	Full Name (Last, First, Middle Initial) Joseph Wilson	Date of Receipt	
	Mailing Address 7720 Sagamore Hills	05 03 YYYYY 05 03 2011	
	City	State Zip Code	Transaction ID: SA11Al.33745
	Sagamore Hills	OH 44067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator - Mayfield Heights	Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	250.00	
	Full Name (Last, First, Middle Initial) Mark A Wilson		Date of Receipt
	Mailing Address 140 Packet Drive		0 6 2 9 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.34214
	Charles Town	WV 25414	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	280.00
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Deducti-
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	280.00	
	SUBTOTAL of Receipts This Page (optional)	I.	790.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of the Detailed Summary Pa	he (crieck only one)
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Ms Sherriann Wood Mailing Address 5 Aberfield Lane  City Miamisburg  FEC ID number of contributing	State Zip Code OH 45342	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer HCR.ManorCare, Inc.  Receipt For:  Primary  Other (specify) ▼	Occupation RDO - Central Division Region Aggregate Year-to-Date ▼  275	Bi-Weekly Payroll Deduction - 25.00
 3.	Full Name (Last, First, Middle Initial) Cynthia M Zalewski Mailing Address 3845 Drummond Rd City	State Zip Code	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Toledo FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.	OH 43613  C  Occupation Senior Attorney	Amount of Each Receipt this Period  296.11  Bi-Weekly Payroll Deduction
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	.11
- :.	Full Name (Last, First, Middle Initial) Daniel A Zawadzki  Mailing Address 18910 Mallard Cove		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.34220
	Middleburg Heights  FEC ID number of contributing federal political committee.	OH 44130	Amount of Each Receipt this Period  228.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  228	.00
s	SUBTOTAL of Receipts This Page (optional)		799.11
	OTAL This Period (last page this line number		99563.12

TEMIZED DISBURSEMENTS    for each category of the   21 to   22   28   28   28   28   28   28   2	SCHEDULE B (FEC FOIII 3X)		Use separate schedule(s)				E NUMBER: PAGE 56 / 78						'8
NAME OF COMMITTEE (In Full) HOR Manor Care PAC  Full Name (Last, First, Middle Initial) ALLANCE FOR QUALITY NURSING HOME CARE INC. POLITLCAL ACTION COMMITTEE (ANNE PAC) Mailing Address 1350 CONNECTICUT AVENUE NW SUITE 900 Slate Zip Code WASHINGTON DC 20036 Purpose of Disbursement Donation for Memo Dated March 10, 2011  Cardidate Name ALLYSON SCHWARTZ FOR CONGRESS  Mailing Address P.O. Box 2232  City Senate President Contribution for event held Monday, March 14, 2011 Condidate Name ALLYSON Y. SCHWARTZ  Office Sought: Y Primary General District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P.O. Box 21093  City State Zip Code PA 19046  PA 19046  Transaction ID: SB23.33648  Date of Disbursement this Perivation of the Pace of Disbursement this Perivation of Disbursement the Monday, March 14, 2011 Condidate Name ALLYSON Y. SCHWARTZ  Office Sought: Y Primary General District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City State Zip Code Pa 19046  Transaction ID: SB23.33683 Date of Disbursement this Perivation of Disbursement Disbursement this Perivation of Disbursement Disbu		Detailed S	ummary Page		2 2	1b [	22 28a		28b	28	c $\square$	29	
Full Name (Last, First, Middle Initial)  ALLIANCE FOR QUALITY NURSING HOME CARE INC. POLITICAL ACTION COMMITTEE (AGNONIC PAC)  Mailing Address 1350 CONNECTICUT AVENUE NW SUITE 900  City WASHINGTON DC 20036  Purpose of Disbursement Donation for Memo Dated March 10, 2011  Candidate Name President State: District: 13  City Senate President State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P, O, BOX 21093  City Schale Zip Code Purpose of Disbursement For: 2012 Amount of Each Disbursement this Pericular State Senate President State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P, O, BOX 21093  City Schale Zip Code Senate President State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P, O, BOX 21093  City State: PA District: 13  City State Zip Code CATONSVILLE MD 21228  Purpose of Disbursement Category/ Type  Disbursement For: 2012  X Primary General Other (specify) ▼  Amount of Each Disbursement This Pericular State of Disbursement  Disbursement This Pericular State of Disbursement  Disbursement Tor: 2012  X Primary General Disbursement Other (specify) ▼  Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Amount of Each Disbursement This Pericular State of Disbursemen	or for commercial purposes, other than using the n												
ALLIANCE FOR QUALITY NURSING HOME CARE INC. POLITLCAL ACTION COMMITTEE (AQNHC PAC)  Mailing Address  1350 CONNECTICUT AVENUE NW SUITE 900  City WASHINGTON DC 20036  Purpose of Disbursement Donation for Memo Dated March 10, 2011  Cardidate Name  Other (specify)  Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ FOR CONGRESS  Mailing Address P.O. Box 2232  City Jenkintown PA 19046  Purpose of Disbursement Contribution for event held Monday, March 14, 2011  Cardidate Name  Category' Type  Transaction ID: SB23,33648  Date of Disbursement this Peric  3 1	` '												
Mailing Address 1350 CONNECTICUT AVENUE NW SUITE 900  City Schate Disbursement Donation for Memo Dated March 10, 2011  Candidate Name President State: District:  Full Name (Last, First, Middle Initial) ALL YSON SCHWARTZ FOR CONGRESS  Mailing Address P.O. Box 2232  City State Zip Code PA 19046  Pa 19046  Purpose of Disbursement Contribution for event held Monday, March 14, 2011  Candidate Name ALL YSON Y. SCHWARTZ  Office Sought: Y House Disbursement For: 2012  City State Zip Code PA 19046  Pa 19046  Pa 19046  Transaction ID: SB23.33648  Date of Disbursement To Date of Disbursement this Pericus Pa 19046  Transaction ID: SB23.33648  Date of Disbursement To Date of Disbursement this Pericus Pa 19046  Transaction ID: SB23.33648  Date of Disbursement this Pericus Pa 19046  Transaction ID: SB23.33648  Date of Disbursement this Pericus Pa 19046  Transaction ID: SB23.33648  Date of Disbursement this Pericus Pa 19046  Transaction ID: SB23.33683  Date of Disbursement	ALLIANCE FOR QUALITY NURSING H	OME CARE II	NC. POLITLC	٩L			Date	of Dis	sburs	ement			Y
Purpose of Disbursement Donation for Memo Dated March 10, 2011  Candidate Name  Office Sought:		AVENUE NW					0 3		1		2	011	
Donation for Memo Dated March 10, 2011 Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ  Office Sought: Senate President State Zip Code PA 19046  Purpose of Disbursement Contribution for event held Monday, March 14, 2011 Candidate Name President State: PA District: 13  Full Name (Last, First, Middle Initial) All President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District: 13  Full Name (Last, First, Middle Initial) President State: PA District State: PA District State: PA District State: PA District State: PA D							Amou	unt of	Each	Disbur			_
Office Sought: House Senate President Disbursement For: 2012	Donation for Memo Dated March 10, 2011					<i>'</i> /		•	•		50	00.00	
ALLYSON SCHWARTZ FOR CONGRESS  Mailing Address P.O. Box 2232  City State Zip Code Jenkintown PA 19046  Purpose of Disbursement Contribution for event held Monday, March 14, 2011  Candidate Name ALLYSON Y. SCHWARTZ  Office Sought: X House Disbursement For: 2012 Senate President State: PA District: 13  Full Name (Last, First, Middle Initial)  BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City State Zip Code CATONSVILLE MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House Disbursement For: 2012 Amount of Each Disbursement this Peric Senate Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House Disbursement For: 2012 X Senate President Senate President General Disbursement For: 2012 X Senate President Disburseme	Senate President	X Primary	General		٠.	,							
City State Zip Code PA 19046  Purpose of Disbursement Contribution for event held Monday, March 14, 2011  Candidate Name ALLYSON Y. SCHWARTZ  Office Sought: X House President State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City State Zip Code MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House Senate ND District: 03  Disbursement For: 2012  Amount of Each Disbursement this Peric Park No. 1500.00  Transaction ID: SB23.33683  Date of Disbursement  Malling Address P.O. BOX 21093  Amount of Each Disbursement this Peric Park No. 1500.00  Transaction ID: SB23.33683  Date of Disbursement Disbursement To Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement this Peric Park No. 1500.00  Amount of Each Disbursement this Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00  Amount of Each Disbursement This Peric Park No. 1500.00	•	SS					Date	of Dis	sburs	ement	V V	· V ·	Υ
Denkintown	Mailing Address P.O. Box 2232	Mailing Address P.O. Box 2232									2	0 1 1	
Contribution for event held Monday, March 14, 2011  Candidate Name ALLYSON Y. SCHWARTZ  Office Sought: X House Senate President State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City CATONSVILLE MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: None of Disbursement For: 2012  Amount of Each Disbursement this Peric Category/ Type  Disbursement For: 2012  Amount of Each Disbursement this Peric Category/ Type  Office Sought: House X Senate President State: MD District: 03	,						Amo	unt of	Each	Disbur	semen	t this P	eric
ALLYSON Y. SCHWARTZ  Office Sought:	Contribution for event held Monday, March 14,		_				•	•		15	00.00	_	
Senate President Other (specify) ▼  State: PA District: 13  Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City CATONSVILLE MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House X Senate President President President State: MD District: 03  X Primary General Other (specify) ▼  Transaction ID: SB23.33683  Date of Disbursement  Date of Disbursement Date of Disbursement this Period Disbursement this Period Disbursement Tor: 2012  X Primary General Other (specify) ▼  State: MD District: 03	ALLYSON Y. SCHWARTZ				٠.	"							
BEN CARDIN FOR SENATE  Mailing Address P.O. BOX 21093  City State Zip Code CATONSVILLE MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN Type  Office Sought: House President President Disbursement For: 2012 X Senate President Disbursement Disburs	Senate President	X Primary	General										
City State Zip Code MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House X Senate President President  State: MD District: 03  Amount of Each Disbursement this Period Category Type  2500.00  Amount of Each Disbursement this Period Category Type  2500.00  Other (specify) Type	,							of Dis	sburs	ement			
CATONSVILLE MD 21228  Purpose of Disbursement Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House	Mailing Address P.O. BOX 21093						o <sup>M</sup> 4	M /	_ <sub>D</sub> C	4	Ý Ž	0 1 1	Y
Donation for event held April 5, 2011  Candidate Name BENJAMIN L CARDIN  Office Sought: House							Amo	unt of	Each	Disbur			_
BENJAMIN L CARDIN  Office Sought: House X Senate President State: MD District: 03  Disbursement For: 2012 X Primary General Other (specify) ▼	Donation for event held April 5, 2011			-	_		L.				25	υυ.00	
X Senate	BENJAMIN L CARDIN					//							
	X Senate President	X Primary	General										

ITEN	REDULE B (FEC Form 3	Use separa	ate schedule(s)		NUMBER: PAGE 57 / 78
11 <b>=</b> 1\	MIZED DISBURSEMENT	'S for each ca	ategory of the ummary Page	(check onl)	y one) 22   X   23   24   25   2 28a   28b   28c   29   3
					for the purpose of soliciting contributions solicit contributions from such committee
NA	AME OF COMMITTEE (In Full) CR Manor Care PAC				
	III Name (Last, First, Middle Initial) OB CASEY FOR SENATE INC				Transaction ID: SB23.33799 Date of Disbursement
Ma	ailing Address 700 13TH STRE SUITE 600	ET NW			05
	ASHINGTON		Zip Code 20005		Amount of Each Disbursement this Period
Co	urpose of Disbursement ontribution for event held Thursday, Jurandidate Name	ne 2, 2011		011	2500.00
RC	OBERT P JR CASEY  ffice Sought: House	Disbursement For:	2012	Category/ Type	
	X Senate President ate: PA District: 00	X Primary Other (speci	General		
BL	ull Name (Last, First, Middle Initial) UILDING RELATIONSHIPS IN D	IVERSE GEOGRAF	PHIC ENVIRC	DNMEN-	Transaction ID: SB23.33644 Date of Disbursement
	S PAC (BRIDGE PAC) ailing Address 499 SOUTH CAI	PITOL ST SW SUIT	E 422		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $
City	ty 'ASHINGTON		Zip Code 20003		Amount of Each Disbursement this Period
Do	urpose of Disbursement onation			012	5000.00
	andidate Name			Category/ Type	
Off	ffice Sought: House Senate President ate: District:	Disbursement For:  X Primary  Other (speci	2011 General ify) ▼		
Sta	ato. Biotiroti				
	ull Name (Last, First, Middle Initial) ITIZENS FOR JOSH MANDEL				Transaction ID: SB23.33870 Date of Disbursement
Ful Cl	ITIZENS FOR JOSH MANDEL	D STREET SUITE 1	1900		
Ful Cl Ma	ITIZENS FOR JOSH MANDEL ailing Address 50 WEST BROA	State	1900 Zip Code 43215		Date of Disbursement  M M / D D D / Y Y O Y T  Amount of Each Disbursement this Period
Ful Cl' Ma Cit; CC Pul Co	ITIZENS FOR JOSH MANDEL ailing Address 50 WEST BROA ty OLUMBUS urpose of Disbursement ontribution for Event Held June 22, 201	State OH	Zip Code	011	Date of Disbursement  O 6 Page 1 Page 2 Page
Cit CC Puu Ca JC	ailing Address 50 WEST BROA  ty OLUMBUS  urpose of Disbursement ontribution for Event Held June 22, 201 andidate Name DSH MANDEL	State OH	Zip Code 43215	011 Category/ Type	Date of Disbursement  M M / D D D / Y Y O Y D  Amount of Each Disbursement this Period
Ful Cl' Ma Citt CC Pul Co Ca JC	ailing Address 50 WEST BROA  ty OLUMBUS  urpose of Disbursement ontribution for Event Held June 22, 201 andidate Name	State OH	Zip Code 43215	Category/	Date of Disbursement  M M / D D D / Y Y Y O Y T  Amount of Each Disbursement this Period

TEMIZED DISBU	•	Use separate scheduler for each category of the			(check only			nly one)					58 / 78		
		Detailed	Summary Page		2		22 28a		8b	24 28c		25 29			
	m such Reports and Staten s, other than using the nam														
NAME OF COMMITTI HCR Manor Care F	EE (In Full)														
Full Name (Last, First, CONGRESSIONAL	Middle Initial) BLACK CAUCUS PAC								n ID:	ent	3373	37			
Mailing Address 2	27 Massachusetts Ave.	, NW					0 <sup>M</sup> 5	M /	05		ž	0 1 1	Y		
City Washington		State DC	Zip Code 20002				Amo	unt of E	Each Di	sburse			eric		
Purpose of Disbursem Donation	ent				012		Ш.	•			500	00.00			
Candidate Name					tegory Γype	//									
Office Sought:	Senate X President	ement For: Primary Other (spe	2012 General ecify)												
State: Dis Full Name (Last, First,	trict:														
DAVE CAMP FOR	,						Date	of Disk	n ID: (	ent					
	Mailing Address 5915 EASTMAN AVENUE SUITE 100						o <sup>M</sup> 4	M /	<sup>D</sup> 21		ž	0 1 1	Y		
City MIDLAND		State MI	Zip Code 48640				Amo	unt of E	Each Di	sburse	ment	this P	eric		
Purpose of Disbursem	ent neld Monday, April 25th			Г		7	L.	_			350	00.00			
Candidate Name DAVID LEE CAMP	<b>y</b> , p				tegory Гуре	ı/									
		ement For: Primary Other (spe	2012 General												
Full Name (Last, First, DAVE CAMP FOR	Middle Initial)								n ID:		3384	46			
	Mailing Address 5915 EASTMAN AVENUE SUITE 100						0 <sup>M</sup> 5	M /	31		ž	0 1 1	Y		
City MIDLAND		State MI	Zip Code 48640				Amo	unt of E	Each Di	sburse	-		eric		
Purpose of Disbursem Contribution requested					011		L.	•			100	00.00			
Candidate Name DAVID LEE CAMP					tegory Γype	//									
Office Sought: X		ement For: Primary Other (spe	2012 General												
State: MI Dis	trict: 04		•												

	HEDULE B (FEC Forn	134)	Use sepa	arate schedule(s)		E NUMBER: PAGE 59 / 78
ITE	MIZED DISBURSEME	NTS	for each	category of the Summary Page	(check o	nly one) 22 🔀 23 🔲 24 🔲 25 🗍
			Detailed	Summary r age	27	28a 28b 28c 29
						n for the purpose of soliciting contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full)	ising the name	and addre	ss of arry political	Committee to	Solicit Contributions from Such Committee
\	HCR Manor Care PAC					
<u>/</u>						
	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIO	NIAL CAMDA	NCN CO			Transaction ID: SB23.33865
	DEMOCRATIC CONGRESSIO	NAL CAMP	AIGIN CO			Date of Disbursement
_	Mailing Address 430 SOUTH 2ND FLOOR	CAPITOL ST	REET, S			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City WASHINGTON		State DC	Zip Code 20003		Amount of Each Disbursement this Period
_	Purpose of Disbursement	•		1		5000.00
_	Donation for event on Friday, June 2	4th 2011			012	
С	Candidate Name				Category/ Type	
C	Office Sought: House	Disburser	ment For:	2011	i ype	_
	Senate	X	Primary	General		
	President State: District:		Other (spe	ecify) 🔻		
	State: District: Full Name (Last, First, Middle Initial)					
	EVERY REPUBLICAN IS CRU	CIAL (ERICE		Transaction ID: SB23.33661 Date of Disbursement		
-	A 10 A 11	`				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
IV	Mailing Address 25 East Main	Street Suite		03 18 2011		
	City Richmond		State VA	Zip Code 23219		Amount of Each Disbursement this Period
_	Purpose of Disbursement		VA	23219		2500.00
	Conation for event held on Wednesd	ay, April 6th 20	)11		012	
	•	ay, April 6th 20	)11		Category/	
C	Donation for event held on Wednesd Candidate Name			2011		
C	Donation for event held on Wednesd	Disburser		2011 General	Category/	
	Candidate Name  Office Sought:  Senate  President	Disburser	nent For:	General	Category/	
C S	Conation for event held on Wednesd Candidate Name  Office Sought:  Senate  President  State:  District:	Disburser	ment For: Primary	General	Category/	
C S	Conation for event held on Wednesd Candidate Name  Diffice Sought:  Senate President District:  Full Name (Last, First, Middle Initial)	Disburser	ment For: Primary	General	Category/	Transaction ID: SB23.33624 Date of Disbursement
S F	Onation for event held on Wednesd Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  FRIENDS OF GLENN THOMP	Disburser	ment For: Primary	General	Category/	Date of Disbursement
S F	Conation for event held on Wednesd Candidate Name  Diffice Sought:  Senate President District:  Full Name (Last, First, Middle Initial)	Disburser	ment For: Primary	General	Category/	Date of Disbursement
S F F M	Conation for event held on Wednesd Candidate Name  Office Sought: House Senate President  State: District:  Full Name (Last, First, Middle Initial)  FRIENDS OF GLENN THOMP  Mailing Address 198 PARK Received.	Disburser X SON	ment For: Primary Other (spe	General ecify) ▼  Zip Code	Category/	Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS						Trans Date of	of Dis	burse				
Mailing Address PO BOX 586	Mailing Address PO BOX 586							<sup>D</sup> 1	<sup>D</sup> / 2	ž 0	111	
City HELENA	State MT	Zip Code 59624				Amou	nt of I	Each	Disburse			d
Purpose of Disbursement Contribution for event held Wednesday	May 25th, 2011			011				•		5000	.00	_
Candidate Name MAX BAUCUS			С	ategory/ Type	′							
Office Sought:  House  X Senate  President	Disbursement F  X Prima  Other											
State: MT District: 00												
Full Name (Last, First, Middle Initial)  B. FRIENDS OF MAX BAUCUS	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS						of Dis	burse				
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City HELENA	State MT	Zip Code 59624				Amou	nt of I	Each	Disburse	ement th	is Perio	d
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Candidate Name MAX BAUCUS												
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Full Name (Last, First, Middle Initial)  FRIENDS OF MIKE H						Date o	of Dis	burse		.33630		
Mailing Address 610 S BOULEV	ARD					0 <sup>M</sup> 1	M /	<sup>D</sup> 2	7 /	ž 0	11	
City TAMPA	State FL	Zip Code 33606				Amou	nt of I	Each	Disburse	ement th	is Perio	d
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Candidate Name MIKE HARIDOPOLOS			C	ategory/ Type	′							
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	for each category of the Detailed Summary Page	' I	<u> </u>	X 23	$\square$	24 28c	25 29	
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HCR Manor Care PAC								
Full Name (Last, First, Middle Initial) GARDNER FOR CONGRESS 2012				saction I			881	
GARDNER FOR CONGRESS 2012			M	of Disbu	2 1		ý 0 Ý 1	Υ
Mailing Address PO BOX 2408			0 6		21		2011	_
City LOVELAND	State Zip Code CO 80539		Amou	unt of Ea	ch Disbı	ırseme	ent this F	eriod
Purpose of Disbursement		,	_ L.			1	000.00	
Contribution Requested 6-20-11  Candidate Name CORY GARDNER		011 Category/						
	rsement For: 2012	Туре						
Senate	X Primary Genera	ıl						
State: CO District: 04	Other (specify)							
Full Name (Last, First, Middle Initial)			Trans	saction I	D: SB	23.33	669	
HATCH ELECTION COMMITTEE INC			Date M	of Disbu			V * V *	V
Mailing Address 175 SOUTH WEST TE	MPLE SUITE 650		0,3	W / L	23	Ľ.	ž 0 ĭ 1	Ĺ
City SALT LAKE CITY	State Zip Code UT 84101		Amou	unt of Ea	ch Disbı	ırseme	ent this F	eriod
Purpose of Disbursement Contribution for event held Wed., March 30, 201	1	011	T L.			1	000.00	_
Candidate Name ORRIN G HATCH		Category/ Type						
°	rsement For: 2012							
χ Senate President	X Primary General Other (specify) ▼	l						
State: UT District: 00	Guier (epeciny)							
Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC				saction I of Disbu			839	
Mailing Address 175 SOUTH WEST TE	MPLE SUITE 650		0 <sup>M</sup> 5	M / [	27	Υ	ž 0 i 1	Y
City SALT LAKE CITY	State Zip Code UT 84101		Amou	unt of Ea	ch Disbı	ırseme	ent this F	eriod
Purpose of Disbursement Contribution for event held Saturday, June 4th 2	011	011	T L.			-	500.00	_
Candidate Name ORRIN G HATCH		Category/ Type						
ÿ	xsement For: 2012 X Primary General Other (specify)							
President								
State: UT District: 00								
	(ا					2	500.00	

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one)  21b
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NAME OF COMMITTEE (In Full) HCR Manor Care PAC	o and address of any pointed comm	
Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC		Transaction ID: SB23.33840 Date of Disbursement
Mailing Address 175 SOUTH WEST TEN	IPLE SUITE 650	05 / 27 / 2011
City SALT LAKE CITY	State Zip Code UT 84101	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution for event held Saturday, June 4th 20		4500.00
Candidate Name ORRIN G HATCH	T	egory/ ype
X Senate President	ement For: 2012 Primary X General Other (specify) ▼	
State: UT District: 00  Full Name (Last, First, Middle Initial)  JIM RENACCI FOR CONGRESS		Transaction ID: SB23.33800 Date of Disbursement
Mailing Address 150 SMOKERISE DR		05 / 11 / 2011
City WADSWORTH	State Zip Code OH 44281	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution requested 5-11-11		1500.00
Candidate Name JAMES B RENACCI	l l	egory/ ype
Senate President	ement For: 2012 Primary General Other (specify)	
State: OH District: 16  Full Name (Last, First, Middle Initial)  KIND FOR CONGRESS COMMITTEE		Transaction ID: SB23.33871 Date of Disbursement
Mailing Address 205 5TH AVENUE SOU	ТН	06 M / D D / Y Y Y O Y Y
City LA CROSSE	State Zip Code WI 54601	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution for Event Held Wednesday, July 6, 2	011	1000.00
Candidate Name RON KIND	I I	egory/ ype
9 1	ement For: 2012 Primary General Other (specify)	
State: WI District: 03		
SUBTOTAL of Disbursements This Page (optional)		7000.00

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	Detailed Summary Page	27	22 ) 28a	( 23 28b	28c	$\vdash$	29	30b
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NAME OF COMMITTEE (In Full)	le and address of any political co	ommittee to sor	icit contribt	ILIONS IT	om such (	COMMIN	illee	
HCR Manor Care PAC								
/								
Full Name (Last, First, Middle Initial) MANCHIN FOR WEST VIRGINIA			Transac Date of I	Disburse	ement			
Mailing Address PO BOX 5202			0 2	/ <b>1</b>	7 /	ž	0 1 1	Y
City CHARLESTON	State Zip Code WV 25361		Amount	of Each	Disburse	-		-
Purpose of Disbursement	1044 - 1 1   -   -   -   -   -   -   -   -	Tay D. J.				250	0.00	
Contribution for event held Thursday, March 10, 2 Candidate Name		Category/						
JOE, III MANCHIN		Type						
X Senate President	ement For: 2012 Primary General Other (specify)							
State: WV District: 00								
Full Name (Last, First, Middle Initial) MANCHIN FOR WEST VIRGINIA			Transac Date of I	Disburse	ement	3388	32	
Mailing Address PO BOX 5202			06	<sup>′</sup> 2	8	ž	0 1 1	Y
City CHARLESTON	State Zip Code WV 25361		Amount	of Each	Disburse			-
Purpose of Disbursement Contribution for event held Tuesday, June 28th		011				250	0.00	
Candidate Name JOE, III MANCHIN		Category/ Type						
x Senate	ement For: 2012 Primary X General							
State: WV District: 00	Other (specify)							
Full Name (Last, First, Middle Initial) MARCIA FUDGE FOR CONGRESS			Transac Date of [			3362	21	
Mailing Address 3729 SILSBY RD			0 <sup>M</sup> 2 M	/ <b>1</b>	7 /	Ž	0 1 1	Y
City UNIVERSITY HEIGHTS	State Zip Code OH 44118		Amount	of Each	Disburse	ement	this F	Period
Purpose of Disbursement	Ir					250	0.00	
Candidate Name		011 Category/						
MARCIA L FUDGE  Office Sought: X House Disburs	ement For: 2012	Туре						
	Primary General  Other (specify)							
State: OH District: 11								
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>				750	0.00	

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	ity VASHINGTON	J		State DC	Zip Code 20005				Amou	int o	f Each	Disbur	seme	nt this F	Perio
	urpose of Disbu					Г							20	00.00	
_	contribution for he candidate Name	eld on Thursday, May	19th 2011			L	01								
	CLAIRE MCCA	SKILL					Typ	gory/ pe							
O	Office Sought:	House		ment For:	2012										
		X Senate President		Primary Other (spe	General										
S	tate: MO	District: 00			j/ ▼										
	,	First, Middle Initial)							Trans	acti	on ID:	SB2	3.336	641	
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	ity OUISVILLE			State KY	Zip Code 40201				Amou	int o	f Each	Disbur	semei	nt this F	Perio
_	urpose of Disbu	rsement		IXI	40201	_	_						50	00.00	
С	ontribution for ev	vent held Monday, Ma	rch 7, 2011				01			•					-
	andidate Name IITCH MCCOI	NNELL					ateg Typ	gory/ be							
O	Office Sought:	House		ment For:	2014										
		χ Senate	X	Primary	General										
S	tate: KY	President District: 00		Other (spe	eciiy) ▼										
	, .	First, Middle Initial)							Trans	acti	on ID:	SB2	3.33	729	
M	ICKINLEY FO	R CONGRESS							Date	of Di	isburse	ement			V
M	failing Address	32 20TH STREI	ET						0 <sup>M</sup> 4	М	<sup>/</sup> 2	2 ′		ž 0 1 1	Ť
	ity			State	Zip Code				Amou	int o	f Each	Disbur	seme	nt this F	Perio
_	VHEELING	reamont		WV	26003								10	00.00	
	urpose of Disbut contributino for ev	rsement vent held Sunday, May	y 1st 2011				01	1		-					
	andidate Name AVID B MCKI	INLEY					_	gory/							
Ō	Office Sought:	χ House		ment For:	2012										
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S	tate: WV	President District: 01		Other (spe	eciry) 🔻										
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NAME OF COMMITTEE (In Full) HCR Manor Care PAC												
Full Name (Last, First, Middle Initial) MENENDEZ FOR SENATE					<b>Trans</b> Date		on ID			336	56	
Mailing Address ONE GATEWAY CEN	TER SUITE 520				0 3	М	<sup>/</sup> D(	0 4	/	ž	0 1 1	Υ
City NEWARK	State Zip Code NJ 07102				Amou	ınt o	f Each	n Dis	burse	-	this P	-
Purpose of Disbursement Contribution Requested 3/4/11		-	011		L.		•			250	00.00	
Candidate Name ROBERT MENENDEZ	0010		tego Type									
Office Sought:    House   Disbu	x Primary 2012 X Primary General Other (specify)											
Full Name (Last, First, Middle Initial) MONTANANS FOR TESTER						of D	isburs	eme				
Mailing Address PO BOX 1135					0 6	М	/ D .	1 5	/ L	ž	0 1 1	Y
City HELENA	State Zip Code MT 59624				Amou	ınt o	f Each	n Dis	burse	-	this P	
Purpose of Disbursement Contribution for event held on Tuesday, June 14	łth	_	011		L.		•			100	00.00	
Candidate Name JON TESTER		1	tego Type	•								
Office Sought: House Disbu $\chi$ Senate President	rsement For: 2012  X Primary General  Other (specify) ▼											
State: MT District: 00												
Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIA	COMMITTEE				Trans Date		isburs	eme				V
Mailing Address 425 SECOND STREE	ΓNE				0 5		<u> </u>	0 6	Ĺ	2	0 1 1	
City WASHINGTON	State Zip Code DC 20002				Amou	ınt o	f Each	n Dis	burse	-	this P	-
Purpose of Disbursement Donation for 2011 requested 5-5-11		-	012				-			500	00.00	-
Candidate Name	2011		tego Type									
Senate President	rsement For: 2011  X Primary General Other (specify)											
State: District:												
	d)			<b>&gt;</b>						850	00.00	

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	ly Information copied from such Reports and Stater for commercial purposes, other than using the nam			
$\rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
<u></u>	Full Name (Last, First, Middle Initial)			Transaction ID: SB23,33652
۱.	NELSON 2012			Date of Disbursement
	Mailing Address PO BOX 8666			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}^Y \end{bmatrix}$
	City OMAHA	State Zip Code NE 68108		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for event held on Wednesday, March	16th 2011	011	3500.00
	Candidate Name E BENJAMIN NELSON		Category/ Type	
	°	ement For: 2012 Primary General Other (specify)		
	State: NE District: 00			
3.	Full Name (Last, First, Middle Initial) PAT ROBERTS FOR US SENATE INC			Transaction ID: SB23.33866 Date of Disbursement
	Mailing Address PO BOX 433			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & Y \\ I & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} \end{bmatrix} \ Y$
	City GREAT BEND	State Zip Code KS 67530		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for event held on on Thursday, June	30th 2011	011	1000.00
	Candidate Name PAT ROBERTS		Category/ Type	
		ement For: 2014 Primary General Other (specify)		
	State: KS District: 00			
<b>).</b>	Full Name (Last, First, Middle Initial) POMPEO FOR CONGRESS INC			Transaction ID: SB23.33879 Date of Disbursement
	Mailing Address PO BOX 780146			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix} \ Y$
	City WICHITA	State Zip Code KS 67212		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Requested 6/20/11		011	1000.00
	Candidate Name MICHAEL RICHARD POMPEO		Category/ Type	
	· —	ement For: 2012 Primary General Other (specify)		
_	State: KS District: 04			
s	SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	5500.00
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City Roswell		State GA	Zip Code 30077				Amou	ınt of	Each	Disburs	emen	t this P	'erio
Candidate Name	event held Monday, May	Disbursement For X Primary		Ca	01 <sup>-</sup> ateg Typ	ory/	<u> </u>				15	00.00	
,	, First, Middle Initial) R CONGRESS COM P. O. BOX 713	MITTEE							sburse	SB23 ement		68 0 1 1	Υ
City WHEATON		State IL	Zip Code 60187				Amou	ınt of	Each	Disburs	emen	t this P	'eric
Candidate Name PETER ROSE Office Sought:	event held Thrusday, Ma	Disbursement For X Primary		Ca	01 <sup>-</sup> ateg Typ	ory/					15	00.00	
,	District: 06 , First, Middle Initial) WN FOR US SENAT	E COMMITTEE					Date	of Dis	on ID:	SB23	3.338	28	
Mailing Address	P.O. BOX 395						0 <sup>M</sup> 5	M /	<sup>D</sup> 2	0 /	ž	0 1 1	Y
City WRENTHAM	,	State MA	Zip Code 02903				Amou	ınt of	Each	Disburs		t this P	
Purpose of Disb Contribution for Candidate Name SCOTT P BR	event held Wednesday, c			Ca	01 <sup>-</sup> ateg	ory/					23	0.00	-
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State. IVIA													

	CHEDULE B (FEC Form 3)	Use sen	arate schedule(s)	_	E NUMBER: PAGE 68 / 78
IT	EMIZED DISBURSEMENT	for each	category of the Summary Page	(check or 21b 27	nly one)  22   X   23   24   25   28a   28b   28c   29   1
	y Information copied from such Reports an for commercial purposes, other than using				
$\rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC		<b>,</b>		
	Full Name (Last, First, Middle Initial) SNOWE FOR SENATE				Transaction ID: SB23.33743 Date of Disbursement
	Mailing Address PO BOX 2012				05 06 7 2011
	City PORTLAND	State ME	Zip Code 04104		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for event held on Wednesday	v, May 25th		011	2500.00
	Candidate Name OLYMPIA J SNOWE			Category/ Type	
	X Senate President	Disbursement For:  X Primary  Other (spe	2012 General		
	State: ME District: 00  Full Name (Last, First, Middle Initial)  SNOWE FOR SENATE				Transaction ID: SB23.33744 Date of Disbursement
	Mailing Address PO BOX 2012				05
	City PORTLAND	State ME	Zip Code 04104		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution for event held on Wednesday	y, May 25th		011	2500.00
	Candidate Name OLYMPIA J SNOWE			Category/ Type	
	X Senate President	Disbursement For: Primary Other (spe	2012 X General ecify) <b>V</b>		_
	State: ME District: 00  Full Name (Last, First, Middle Initial)				Transaction ID: SB23.33723
	Stabenow Victory Fund 2012  Mailing Address PO Box 4462				Date of Disbursement  O 4
	City	State	Zip Code		Amount of Each Disbursement this Perio
	East Lansing Purpose of Disbursement	MI	48826		2500.00
	Donation requested 4/21/11  Candidate Name			012 Category/	
				Туре	_
	Office Sought: House Senate President	Disbursement For:  X Primary Other (spe	2012 General		

## SCHEDIII E B (FEC Form 3Y)

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)		NUMBER: PAGE 69 / 78
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 (offe)  22
Any Information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial)  TIBERI FOR CONGRESS			Transaction ID: SB23.33864 Date of Disbursement  M 6 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2931 E DUBLIN GR, SUITE 190			
City COLUMBUS	State Zip Code OH 43231		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution requested 6/15/11		011	1000.00
Candidate Name PATRICK J TIBERI		Category/ Type	
Senate President	oursement For: 2012  X Primary General  Other (specify)		
State: OH District: 12  Full Name (Last, First, Middle Initial)			Transaction ID: SB23.33829
WALLY HERGER FOR CONGRESS (	COMMITTEE		Date of Disbursement    M
Mailing Address PO BOX 1007			03 20 2011
City WILLOWS	State Zip Code CA 95988		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution for event held Thursday, June 9t	n 2011	011	2500.00
Candidate Name WALLY HERGER		Category/ Type	
Office Sought:  X House Senate President State: CA District: 02	oursement For: 2012  X Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) WILSON FOR SENATE			Transaction ID: SB23.33687 Date of Disbursement
Mailing Address PO BOX 10248			$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&\end{smallmatrix}\end{bmatrix} \  \   \begin{bmatrix}\begin{smallmatrix}D&0&0\\0&7\end{smallmatrix}\end{bmatrix} \  \   \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&1&1\\2&0&1&1\end{smallmatrix}$
City ALBUQUERQUE	State Zip Code NM 87184		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution for event held Saturday, April 16	h 2011	011	1000.00
Candidate Name HEATHER A WILSON		Category/ Type	
X Senate President	oursement For: 2012  X Primary General  Other (specify)		
State: NM District: 00			4500.00
SUBTOTAL of Disbursements This Page (option	nal)	<u></u>	4500.00
TOTAL This Period (last page this line number	only)		

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page  FOR LINE (check onl 21b 27)	PAGE 70 / 78   PAGE
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam	, , , ,	· ·
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) WILSON FOR SENATE  Mailing Address PO BOX 10248		Transaction ID: SB23.33735 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City ALBUQUERQUE Purpose of Disbursement Contribution for Event Held Wednesday, May 4, 2	State Zip Code NM 87184	Amount of Each Disbursement this Period 1000.00
Candidate Name HEATHER A WILSON	Category/ Type	
Office Sought:    House   Disburse   X     Senate   President     State: NM   District: 00	ement For: 2012 Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<b>—</b>	106500.00

SCHEDOLE B (I LO I OHII 3X)	Use separate schedule(s)	(check on	= NUMBER: llv one)	PAGE /1 / /8
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 28c X 29
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)				
HCR Manor Care PAC				
Full Name (Last, First, Middle Initial) Batchelder for Representative Committe	9		Transaction ID: S Date of Disburseme	ent
Mailing Address 4086 Irvine Oval			03	2011
City Medina	State Zip Code OH 44256		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Contribution for meeting held on 3/28/11				1500.00
Candidate Name		Category/ Type		
Office Sought: House Disbu	sement For: 2012  X Primary General  Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: 5	 SB29.33877
Berg for Congress			Date of Disburseme	ent
Mailing Address PO BOX 9394			0 6 2 1	<sup>'</sup> 2011
City FARGO	State Zip Code ND 58106		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Contribution Requested 6/20/11				1000.00
Candidate Name		Category/ Type		
• -	sement For: 2012  X Primary General Other (specify)	7,		
Full Name (Last, First, Middle Initial)			Transaction ID: S	
Committee to Elect Christopher R. Wide			Date of Disburseme	ent / Y Y Y Y Y 2 0 1 1
Mailing Address 23 South Center Street Suite 103			03 28	2011
City Springfield	State Zip Code OH 45502		Amount of Each Dis	sbursement this Period
Purpose of Disbursement Contribution requested 3/28/11		•		2500.00
Candidate Name		Category/ Type		
Senate President	sement For:  Primary General  Other (specify) ▼			
State: District:				
				5000.00

CHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE (check only one)	
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 28a 28b	24 25 2 28c X 29 3
ny Information copied from such Reports and Stater for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)  HCR Manor Care PAC				
Full Name (Last, First, Middle Initial) Committee to Elect Christopher R. Widen	er		Transaction ID: Date of Disbursen	nent
Mailing Address 23 South Center Street Suite 103			05 7 24	2011
City Springfield	State Zip Code OH 45502		Amount of Each D	Disbursement this Period
Purpose of Disbursement Contribution for event held May 26, 2011				1000.00
Candidate Name		Category/ Type		
	ement For: 2012 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Committee to Elect Earl Ray Tomblin 201	1		Transaction ID: Date of Disbursen	
Mailing Address 5 Greenbrier St.			06 15	2011
City Charleston	State Zip Code WV 25311		Amount of Each D	Disbursement this Period
Purpose of Disbursement Contribution for event held June 29th 2011				1000.00
Candidate Name		Category/ Type		
Senate President	ement For: 2011 Primary General Other (specify)			
State: District: Special Full Name (Last, First, Middle Initial) Committee to Elect Niehaus	I-General		Transaction ID: Date of Disbursen	SB29.33736 nent
Mailing Address 11131 Little Indian Cree	k Road		05	2 2011
City New Richmond	State Zip Code OH 45157		Amount of Each D	Disbursement this Period
Purpose of Disbursement Donation requested 4/29/11	10107			1000.00
Candidate Name		Category/ Type		
· —	ement For: 2012 Primary General Other (specify)	,,		
SUBTOTAL of Disbursements This Page (optional)				3000.00

SCHEDOLL B (I LO I OHII SX)	Use separate schedule(s)	(check on	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28 28a 28b 28c X 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) Committee to Elect Niehaus			Transaction ID: SB29.33830 Date of Disbursement
Mailing Address 11131 Little Indian Cre	ek Road		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City New Richmond	State Zip Code OH 45157		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution for event held May 26, 2011			2500.00
Candidate Name		Category/ Type	
ÿ	sement For: 2012  X Primary General  Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.33878
Diane Black for Congress			Date of Disbursement
Mailing Address PO BOX 1437			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Gallatin	State Zip Code TN 37066		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution Requested 6/20/11			1000.00
Candidate Name		Category/ Type	
	sement For: 2012  X Primary General  Other (specify)		
Full Name (Last, First, Middle Initial) Friends of Bill Adolph Jr.			Transaction ID: SB29.33681 Date of Disbursement
Mailing Address P.O. Box 303			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Springfield	State Zip Code PA 19064		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution for event held May 9, 2011			450.00
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optiona		<b>&gt;</b>	3950.00

		Use separate schedule(s		NE NUMBER: PAGE 74 / 78 only one)
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	<u> </u>
	r Information copied from such Reports and State or commercial purposes, other than using the nar		d by any perso	on for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi			Transaction ID: SB29.33676 Date of Disbursement
	Mailing Address 323 West Front Street			03
	City Media	State Zip Code PA 19063		Amount of Each Disbursement this Pe
	Purpose of Disbursement Contribution for event held May 19, 2011 Candidate Name		Category/	1000.00
		rement For:  Primary General  Other (specify) ▼	Type	
	Full Name (Last, First, Middle Initial) Friends of Farber			Transaction ID: SB29.33833  Date of Disbursement
	Mailing Address 7706 State Route 703			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Celina	State Zip Code OH 45066		Amount of Each Disbursement this Pe
	Purpose of Disbursement Contribution for event held May 26, 2011			1230.00
	Candidate Name		Category/ Type	
	ÿ	ement For: 2012  C Primary General  Other (specify)		
	Full Name (Last, First, Middle Initial) Friends of Joe Scarnati			Transaction ID: SB29.33662 Date of Disbursement
	Mailing Address P. O. Box 792			03 / 18 / 2011
	City Harrisburg	State Zip Code PA 17108		Amount of Each Disbursement this Pe
	Purpose of Disbursement Contribution requested 3/17/11 Candidate Name		Category/	2000.00
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	Type	

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CHEDULE B (FEC Form 3X)	Use separate schedule(s)	(s) FOR LINE NUMBER: PAGE		GE 75	/ 78						
EMIZED DISBURSEMENTS	for each category of the	(check only one)		-		☐ 24 ☐ 25 ☐ 26			7 26		
	Detailed Summary Page	┈	21b 27	Н	22 28a	23 28b	Н	24 28c	X 29		] 26 30b
y Information copied from such Reports and State	ments may not be sold or used	by any	persor	n for	the purpo	se of s	olici	ting co	- 1	ns	
for commercial purposes, other than using the nan	ne and address of any political	commit	tee to	solici	t contribu	tions fr	om s	such c	ommitte	е	
NAME OF COMMITTEE (In Full)											
HCR Manor Care PAC											
Full Name (Last, First, Middle Initial) Friends of Kirk Cox					Transact				33821		
1					0 5 M	/ D	9	/ Y	ž 0 1	1 Y	
Mailing Address P.O. Box 1205					0.3		Э		201		
City	State Zip Code				Amount of	of Each	Dis	burse	ment thi	s Peri	iod
Colonial Heights	VA 23834								1000.	00	
Purpose of Disbursement Contribution for event held June 22nd 2011						•			1000.		
Candidate Name		Categ	•								
- H	ement For: 2011										
Senate President	C Primary General Other (specify) ▼										
State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				١.	Transact	tion ID:	: S	B29.	33732		
FRIENDS OF MIKE TURZAI					Date of D	Disburs	eme	_			
Mailing Address 125 Hillvue Ln					04	<sup>/</sup> 2	26	/ Y	ž 0 1	1 Y	
City	State Zip Code				Amount o	of Each	Dis	burse	ment this	s Peri	iod
Pittsburgh	PA 15237				· · ·	•			1000.	00	
Purpose of Disbursement Contribution for event held on Wednesday, May 1	1. 2011				1000.00		o o				
Candidate Name	,	Categ									
- H	ement For: 2012  ( Primary General										
President	Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial) Friends of Senator Edd Houck					Transact Date of D		_		33872		
Mailing Address P.O. Box 7					0 <sup>M</sup> 6 <sup>M</sup>	<sup>/</sup> 2	2 1	/ Y	ž 0 1	1 Y	
City	State Zip Code			+	Amount of	of Each	Dis	burse	ment thi	s Peri	iod
Spotsylvania	VA 22553								1000	00	
Purpose of Disbursement Contribution requested Monday, June 20, 2011		•							1000.	ηŇ	
Candidate Name		Categ	jory/								
		Тур									
	ement For: 2011  C Primary General										
Senate President	Other (specify)										
State: District:											
JBTOTAL of Disbursements This Page (optional)			<u> </u>	-		•			3000.	00	
OTAL This Period (last page this line number only	· · · · · · · · · · · · · · · · · · ·		•				•				
AN026	<i>J</i> ······					O a la c al	la F	, F-	m 3X) (I		

	Use separate schedule(s	(check on	E NUMBER: PAGE 76 / 78
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22   23   24   25
Any Information copied from such Reports and Sta or for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full)	arile and address of any pointic	ai committee to so	Olicit Contributions from Such Committee
HCR Manor Care PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.33823
Friends of Shannon Jones			Date of Disbursement
Mailing Address 800 Valley View Point	:		$\begin{bmatrix} 0 & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 \\ 2 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 & 1 \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Springboro Purpose of Disbursement	OH 45066	l	1000.00
Contribution requested 5-20-11			
Candidate Name		Category/ Type	
Senate President	ursement For: 2014  X Primary General  Other (specify) ▼	•	
State: District:			
Full Name (Last, First, Middle Initial) Friends of Shannon Jones			Transaction ID: SB29.33834 Date of Disbursement
Mailing Address 800 Valley View Point			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Springboro	State Zip Code OH 45066		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution for event held May 26, 2011	43000		750.00
Candidate Name		Category/ Type	
Office Sought:  House Senate President State:  Disb	x Primary General Other (specify) ▼	1 .,,,,,	
Full Name (Last, First, Middle Initial) Friends of Tom Patton			Transaction ID: SB29.33863 Date of Disbursement
Mailing Address 17157 Rabbit Run Dr	ve		$\begin{bmatrix} \begin{smallmatrix} M & 6 & M \\ 0 & 6 & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 5 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & 2 & 0 & 1 & 1 \end{bmatrix}$
City Strongsville	State Zip Code OH 44136		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution for event held June 16th 2011		•	2500.00
Candidate Name		Category/ Type	
Senate President	x Primary General  Other (specify) ▼		
State: District:			

		separate schedule(s)	FOR LINE (check onl	-	PAGE 77 / 78
TEMIZED DISBURS	Detai	ach category of the iled Summary Page	21b 27	22 23 2 28a 28b	24 25 28c X 29
Any Information copied from suc or for commercial purposes, other					
NAME OF COMMITTEE (In HCR Manor Care PAC		arress of any pointour		mon contributions from c	adii daiiiiiiled
Full Name (Last, First, Middl IOWA HEALTH PAC	e Initial)			Transaction ID: S Date of Disburseme	
Mailing Address 1775 9	90th St			$\begin{bmatrix} 0 & 4 & 4 & 4 \end{bmatrix}$	Y 2011
City West Des Moines	State IA	Zip Code 50266		Amount of Each Dis	
Purpose of Disbursement Donation			012		1250.00
Candidate Name			Category/ Type		
Office Sought: Hous Sena Presi	te Primar				
State: District: Full Name (Last, First, Middl	,			Transaction ID: S	
Jimmy Stewart for State	Senate			Date of Disburseme	
Mailing Address 1021 F	Four Mill Creek Road			05 / 24	Ž O Š I Š
City Coolville	State OH	Zip Code 45723		Amount of Each Dis	
Purpose of Disbursement Contribution for event held M Candidate Name	lay 26, 2011		Category/		750.00
Candidate Name			Type		
Office Sought: Hous Sena Presi	te X Primar				
State: District:					
Full Name (Last, First, Middl Keystone Leader's PAC	e Initial)			Transaction ID: S Date of Disburseme	nt
Mailing Address P.O. B	30x 506			03 / 18	Y ŽOŽII
City Harrisburg	State PA	Zip Code 17108		Amount of Each Dis	
Purpose of Disbursement Donation Requested 3/17/11					2000.00
Candidate Name			Category/ Type		
Office Sought: Hous Sena	te Primar				
Proci		(Opedity) 🔻			
State: President		•			

В.

District:

ago# 1100100000		
SCHEDULE B (FEC Form 3X)		INE NUMBER: PAGE 78 / 78
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page  (chec	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Killion Victory Committee		Transaction ID: SB29.33682 Date of Disbursement  0 3 1 2 2 0 1 1
Mailing Address 3 Laura Lynn Road  City Glen Mills	State Zip Code PA 19342	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution for event held on April 5,2011	FA 19342	300.00
Candidate Name	Category Type	
Senate President	ement For: Primary General Other (specify)	
State: District:		
Full Name (Last, First, Middle Initial) WHCA-PAC (Washington)		Transaction ID: SB29.33803  Date of Disbursement
Mailing Address 303 Cleveland Ave. SE Ste. 206		05 M / D D / Y Y Y O 1 1 Y
City Tumwater	State Zip Code WA 98501	Amount of Each Disbursement this Period
Purpose of Disbursement Donation Requested 5-12-11	012	500.00
Candidate Name	Category Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	800.00
TOTAL This Period (last page this line number only)	<b>•</b>	28250.00

State: